



3<sup>d</sup>

—PET. 25-5. p. 20

72-1111





Digitized by the Internet Archive  
in 2016

<https://archive.org/details/b28035677>







*R. J. Elmshie*

# MEDICAL MISSIONS;

AS ILLUSTRATED BY

SOME LETTERS AND NOTICES OF THE LATE

DR. ELMSLIE.



Printed for the  
EDINBURGH MEDICAL MISSIONARY SOCIETY.

1874.

MURRAY AND GIBB, EDINBURGH,  
PRINTERS TO HER MAJESTY'S STATIONERY OFFICE.

REF

ROYAL COLLEGE OF PHYSICIANS LIBRARY	
CLASS	92 ELM
ACCN.	46141
SOURCE	Maggs £20.00
DATE	18 September 1992



# CONTENTS.

	PAGE
I. EARLY LIFE AND PREPARATION FOR MISSIONARY WORK,	1
II. KASHMIR, . . . . .	13
III. FIRST YEAR'S WORK IN INDIA, . . . . .	23
IV. FIRST ANNUAL REPORT AND CORRESPONDENCE, . . . . .	41
V. SECOND YEAR'S LABOURS, . . . . .	55
VI. SCHEME FOR TRAINING NATIVE MEDICAL MISSIONARY EVANGELISTS, . . . . .	73
VII. WORK AND PROSPECTS IN CHUNBA, . . . . .	95
VIII. THIRD YEAR'S LABOURS, . . . . .	111
IX. RETURN TO UMRITSUR, AND VISIT TO CALCUTTA, . . . . .	129
X. FOURTH YEAR'S LABOURS, . . . . .	141
XI. FIFTH YEAR'S LABOURS, . . . . .	161
XII. ZENANA MEDICAL MISSIONS, . . . . .	177
XIII. VISIT HOME, 1870-71, . . . . .	207
XIV. RETURN TO INDIA, AND CLOSE OF LABOURS, . . . . .	221



## P R E F A C E.

---

IN the year 1841, the Rev. Peter Parker, M.D., a medical missionary from America, who had laboured in China, and was returning on a visit to the United States, passed through Edinburgh, and was the guest of the late Dr. Abercrombie. Dr. Abercrombie was so greatly interested in the intelligence he thus received, that he called together a few Christian friends to hear Dr. Parker's account of the work in China, and to consider the possibility of forming an auxiliary association in Edinburgh to promote Medical Missions.

The writer of this paragraph was one of this small company, and well remembers the scene in a parlour of the Waterloo Hotel. On that occasion he was accompanied by the Rev. William Swan, who had just then returned from Siberia, the mission in which he had served for many years having been suddenly broken up by the Russian Government, through the hostile influence of the Holy Synod of the Greek Church. When Dr. Parker heard the name of Mr. Swan, he eagerly inquired if he were the author of *Letters on Missions*, and was delighted to be introduced, explaining it was *that book* that had made him a missionary.

It was soon agreed to form an association. Dr. John Coldstream, who was not present, having been proposed as Secretary, it was resolved to apply to him to take the responsible charge. He consented, and that was the first formation of the Edinburgh Medical Missionary Society.

It was some time, however, before the project obtained general recognition. Several distinguished members of the medical profession, one after another, gave it their countenance ; and gradually the Society at its annual meeting took a more prominent place. But for several years it did little more than expound the principle from the platform or by the press. Sir Culling Eardley Smith had early recommended a mission to Syria ; but it was long found impossible to secure the services of any man sufficiently qualified for the work, and it was not till a much later period in the history of the Society that their mission at Nazareth was commenced.

Thus the attention of the Committee of Management was more fully turned to the training of such students as manifested capacity and Christian zeal, and to the special provision required in preparing them for this department of the missionary enterprise. They succeeded slowly in carefully selecting and bringing forward a goodly number of qualified agents, who have since distinguished themselves in the foreign field.

Meanwhile the Society had annexed and incorporated with itself a medical dispensary in Cowgate, which had been established previously in a missionary

spirit; and this institution has been greatly blessed, at once as a local charity, affording relief, medical and evangelistic, to masses of the poorest of the poor, and as an admirable school for the education of the students as medical missionaries, where they have excellent opportunities both of learning practice as surgeons, and of teaching and seeking the profit of many souls that they may be saved.

At this moment a great effort is about to be made to raise funds to enable the Society to build, on the site which they have thus occupied for many years, premises of their own—more extensive, more suitable and commodious—for the greatly extended work they have in hand. They are strongly urged to attempt the training of missionary nurses, and they have many new applications from students for admission. The accommodation for the numerous daily patients is quite insufficient; and it is desirable that, without attempting to set up an hospital, there should be some beds provided for instructive cases. All this will require a considerable outlay; and all who read these lines are therefore earnestly requested to support the special subscription for the Livingstone Medical Missionary Memorial, in connection with the Edinburgh Medical Missionary Society.

The Society is happily and thoroughly undenominational. It aspires to the high office of preparing and supplying medical missionaries to the great Missionary Societies connected with different Churches, and it receives without distinction members

of these various Churches to the advantages of medical education, for which Edinburgh is famous, and to the comforts and society of a Home, which Christian young men who are strangers will appreciate.

A very good illustration of the training provided by this institution, and its results, is given in the little work now presented for circulation among the friends of Medical Missions. In the case of the lamented Elmslie, as it is here brought out, we have a most encouraging example of the good service the Society is rendering in bringing on their way, after a godly sort, the devoted young men of manifest ability who are first prepared of God for the service of the Gospel in this high and noble walk of Christian mercy and evangelization.

It has been thought by the Directors of the Edinburgh Medical Missionary Society, who issue this book, compiled by their Superintendent, the Rev. John Lowe, that the value and importance of Medical Missions could not be better enforced than by a small volume like the present, illustrated by some letters and notices of the late Dr. Elmslie, the devoted and excellent missionary of Kashmir, whose death is so widely deplored, and whose memory is so warmly cherished by them, and by all who knew him and his work. The Directors believe and desire that this volume may prepare the way for a Memoir of Dr. Elmslie which they are glad to know is in preparation by Mrs. Elmslie, and which cannot fail to prove a work of the deepest interest.



I.

Early Life and Preparation for  
Missionary Work.

‘ Chosen, not for good in me,  
Wakened up from wrath to flee,  
Hidden in the Saviour’s side,  
By the Spirit sanctified,  
Teach me, Lord, on earth to show,  
By my love, how much I owe.’



## CHAPTER I.

### EARLY LIFE AND PREPARATION FOR MISSIONARY WORK.

‘A VESSEL meet for the Master’s use, and prepared unto every good work.’ A poor guilty sinner, chosen of God, saved by grace, justified by faith, sanctified by the Spirit, called to be *a fellow-worker with God!* What an honour! ‘Not of works, lest any man should boast; for we are *His* workmanship, created in Christ Jesus unto good works.’ ‘O house of Israel, cannot I do with you as this potter? saith the Lord. Behold, as the clay is in the potter’s hand, so are ye in mine hand.’ ‘By the grace of God, I am what I am.’

The following is a brief record of useful service done for Christ, in Christ’s name, under the constraining influence of the love of Christ, by a poor sinner saved by grace; and therefore, however well fitted for the work, whatever gifts and graces he possessed, and however zealous and successful he proved in the service of the Master, we would give God the glory, and ascribe all to the riches of His grace.

All that need be said about Dr. Elmslie’s early

life may be summed up in a few sentences. Born in Aberdeen, June 29, 1832, and brought up there in humble circumstances, while yet a boy, he had to work hard for his living. Being of a studious turn of mind, he spent his leisure hours in acquiring useful knowledge ; and thus, like many of his distinguished fellow - countrymen, such as Hugh Miller, Robert Moffat, and Dr. Livingstone, while working with his hands, he was cultivating his mind, and laying the foundation of after success, both as a student at the University, and as a medical missionary in India.

Dr. Elmslie, under the teaching and influence of a pious mother, was early brought to the knowledge of the truth. When between seventeen and eighteen years of age, he gained a small bursary, and matriculated at the University of Aberdeen, where he prosecuted classical studies with distinction, and graduated in Arts in 1852. He subsequently went to Leghorn as tutor in a gentleman's family, and, on returning to his native city, accepted an engagement in Mr. Michie's Academy. Having resolved to study for the ministry, he was soon after enrolled as a student in the Free Church College, Aberdeen. In 1858, circumstances led him to change his plans, and to commence the study of medicine. He prosecuted his medical studies at the Universities of Aberdeen and Edinburgh, and graduated at the latter in 1864, after gaining high honours in some of his classes.

Before leaving Aberdeen he applied to the Edinburgh Medical Missionary Society to be received as a student, and was cordially accepted. After completing his studies, he received the appointment of Resident Physician at the Mission Dispensary in the Cowgate, which he held for nearly a year.

About this time, renewed efforts were being made by the Church Missionary Society to establish a mission in Kashmir. Owing, however, to the difficulties and opposition which two missionaries, the Rev. Messrs. Clark and Smith, had to encounter, the effort seemed almost hopeless. In these circumstances, it was thought that, with God's blessing, a medical missionary might gain readier access, and meet with greater acceptance. Accordingly, the late Sir D. F. Macleod, Rev. R. Clark, Dr. Cleghorn, Dr. Farquhar, and other friends, urged the Lahore Missionary Conference of 1862 to solicit the Church Missionary Society to make a trial of this agency. An application was made to that Society through the Conference, but, at first, without success. Sir D. F. Macleod then wrote, strongly representing the peculiar difficulties in the way of establishing a mission in Kashmir, urging every possible argument to induce the Society to send a medical missionary there.

The *Lahore Chronicle* of February 11, 1863, thus refers to the movement, which resulted in the formation of the Kashmir Medical Mission :—

‘ A few members of the medical profession and

other laymen having had in consideration the benefit which would arise from an auxiliary Medical Mission Association in the Punjab, the subject was brought prominently before the Lahore Missionary Conference; and it was resolved that a Committee be formed for considering the advisability of employing medical missionaries to a greater extent, and more systematically.

‘The objects in view are, first, to make known in the Punjab the existence of a Society in Edinburgh with this great aim; and, secondly, to co-operate and associate with that Society by collecting funds on its behalf, and by seeking to derive benefit, in this province and neighbourhood, from its operations.

‘It appears that in no place is there a greater opening, or prospect of advantage to the mission cause, than in the valley of Kashmir, and, for several reasons, it is believed, that a medical missionary would be peculiarly eligible for that province. No regular medical advice is to be obtained, there is no fixed station of Europeans, the population is very numerous, and the country is governed by an independent prince, whose religious prejudices would be in some degree disarmed, if the efforts of missionaries were united with those of a medical agency, whose labours would be directed to the relief of sickness and disease.

‘A proposal is at this time going up from the Punjab to the Church Missionary Society, urging on them to extend their operations to Kashmir. It



seems that the appointment of a medical man in connection with the Mission, would do more than anything else to conciliate prejudice, disarm opposition, and obtain a permanent entrance for the gospel. It would greatly add to the power and comfort of the medical missionary if he were associated with an experienced minister of the gospel, whose hands he would likewise strengthen. If his efforts were blessed with success, there would, humanly speaking, be a great effect produced on this part of India where Kashmir is a household word. Circumstanced as the people are, they feel the value of European influence, and would see in the conduct, and hear from the lips of the missionary physician, the gospel law of love, which elevates his character, and makes him to differ from themselves.

‘It is the opinion of all travellers that the people would hail his arrival with the utmost gladness, and would repose confidence in his skill. For the value which the mountain tribes attach to European medicine, the Committee would refer, amongst others, to the wonderful results of the labours of Dr. Asahel Grant, the father of the Nestorians, to the statements contained in Dr. Hoffmeister’s journey in Kunawur, to other works of Eastern travel, and to the experience of every European traveller in the hill territory of India.’

The Church Missionary Society, moved by the representations of the Lahore Missionary Confer-

ence, and by Sir Donald F. Macleod's appeal, at length resolved to establish a Medical Mission in the Kashmir valley, and, with this in view, applied to the Edinburgh Medical Missionary Society for a suitable agent. At this time there was no Church of England student in the Society's Training Institution in course of preparation for missionary service. With that true catholicity of spirit, however, which characterizes the Church Missionary Society, the Directors, on the recommendation of the Edinburgh Medical Missionary Society, cordially accepted Dr. Elmslie, although a Presbyterian, as their agent to Kashmir.

The following letter, addressed to the wife of Dr. Coldstream, late co-secretary with Mr. Bell of the Edinburgh Medical Missionary Society, shows the spirit in which Dr. Elmslie entertained the proposal then made to him:—

‘EDINBURGH, 39 COWGATE, *August 8, 1863.*

‘DEAR MRS. COLDSTREAM,—Your very kind letter came safely to hand. I have had the good fortune to meet with Dr. Cowan, whom I have found very kind. I received from him much valuable information respecting the country and people of Kashmir.

‘From all that I have learned from Dr. Cowan, I am led to believe that Kashmir is a very suitable sphere for the employment of medical mission agency. There is, however, one great drawback,

of which you are doubtless already aware, that all Europeans are compelled by the Maharajah to quit Kashmir for six months every year. His reason for this capricious and tyrannical act is said to be, that he employs great cruelty towards his miserable and enslaved subjects, whilst collecting his annual taxes. Be this as it may, there the law stands, and it appears to be rigidly enforced. It would only be the hope that, by prayer to God, who is King of kings and Lord of lords, the Maharajah might be led to see the manifest advantages to be gained by the continuous operation of a Christian mission of the nature contemplated, and might be induced to cancel this obnoxious law, that would lead me to think of labouring in a country where such a law exists, seeing that there are other regions as needy, and where the same hindrances do not exist.

‘It is only three weeks since Kashmir was brought before me by Mr. Bell as a missionary field in which to labour.

‘I took a fortnight to consider the matter, and to ask God’s guidance ; and my decision is, that I view the proposal favourably, and am prepared to go to Kashmir, should the details of the arrangements to be drawn up by the Punjab Committee, prove satisfactory ; and, above all, should I, by further prayer and thought about this important undertaking, be led to the conviction, that it is the will of my heavenly Father that I should labour as His servant there. I have written to Mr. Bell to this effect,

and I now leave the matter entirely in God's hands. If it be His will that I should go to Kashmir, I will go. I feel very grateful, both to you and to Dr. Coldstream, for your many acts of kindness to me last winter, and for your united prayers and good wishes on the present occasion. I much need your prayers for strength and wisdom.—Yours, etc.,

‘W. J. ELMSLIE.’

The following letter from Dr. Coldstream, that warm friend and promoter of medical missions, written within three weeks of his death, expresses the high opinion of Dr. Elmslie's qualifications for the work, which frequent intercourse with him had led that ‘beloved physician’ to entertain. It was addressed to Dr. Cleghorn, one of the Punjab Committee appointed by the Lahore Conference, to arrange for the organization of a mission to Kashmir. The letter is dated August 25, 1863 :—

‘ . . . The lively interest you have taken in the proposed mission to Kashmir has especially interested me. Although, from the first, I thought of Elmslie (our most advanced student) as a most suitable person to send as medical missionary, yet, from the conviction I entertained of the little likelihood there was of the Church Missionary Society consenting to accept of a Presbyterian agent, I did not speak either to him or to others.

‘Now I am glad to learn that, during my illness, the Directors of the Church Missionary Society have

encouraged our Directors to believe that, if in other respects Elmslie proves suitable, and is approved of on our report to the Punjab Committee, they will not object to his appointment. But, on this subject at present, I write (as you must understand) unofficially; for, although gradually recovering health and strength, I am still without portfolio, and am *not* at headquarters. You must depend upon Dr. Farquhar for the exact state of matters; my co-secretary, Mr. Bell, is in correspondence with him. I know, however, from letters received from Elmslie himself, that he has prayerfully and deliberately considered the proposal that he should go to Kashmir, and that he is prepared to accept of the appointment should he be thought suitably qualified.

‘He seems to be somewhat staggered by the Rajah’s law of exclusion from his possessions for six months of each year; but I have encouraged him to believe, that it may be quite possible for him to find abundance of occupation during that period of exclusion, in territory under British rule or protection. In writing, Dr. Farquhar had better explain to what extent, and in what place, this may be done, if at all.

‘Now I can bear testimony, very fully and with confidence, in favour of Mr. Elmslie, as having apparently all the gifts and graces which one desires to see conjoined in a medical missionary. I regard him as one of the most promising men who have passed through our hands, and he is of more mature

age than young graduates in medicine generally are. While aiming at the study of divinity, he resided in Italy, for some time, as tutor to some young gentlemen, and, even then, he appeared in the pulpit of the Free Church at Florence. He is generally well educated, has studied medicine and surgery with great zeal, and has been a most diligent pupil and assistant at our Cowgate Mission Dispensary. Let me, therefore, commend Mr. Elmslie to your favourable regards. Should he go to Kashmir, he will have the prayers and sympathies of many friends here.'

With an ardent desire to be fully equipped for the great work to which the Lord had called him, Dr. Elmslie set himself to employ to the best advantage the few months that intervened before his leaving for India.

He became House Physician in the Royal Infirmary under Sir J. Y. Simpson, and devoted his spare time to the special study of such subjects as were likely to prove of future usefulness to him, specially eye and skin diseases. He availed himself of every opportunity of acquiring medical and surgical experience, and his letters testify that he looked back upon the privileges he then enjoyed, and to his connection as a student with the Edinburgh Medical Missionary Society, with peculiar satisfaction and gratitude to God.



## I I.

### Kashmir.

‘O’er the gloomy hills of darkness  
Look, my soul ; be still, and gaze !  
All the promises do travail  
With a glorious day of grace ;  
Blessed jubilee !  
Let thy glorious morning dawn !

Kingdoms wide that sit in darkness,  
Grant them, Lord, the glorious light ;  
And, from eastern coast to western,  
May the morning chase the night ;—  
And redemption,  
Freely purchased, win the day !’



## CHAPTER II.

### KASHMIR.

KASHMIR, the scene of Dr. Elmslie's labours, is an extensive and beautiful district, lying to the north of the Punjab. The following account of the country is gathered from Dr. Elmslie's Kashmiri Vocabulary, from an anonymous pamphlet on Kashmir, and from a review, in the *Friend of India*, of Dr. J. Ince's Kashmir Handbook.

The name of the country is derived from *Kashaf*, the drainer of the valley, and *mar*, a place. The following story regarding the Kashmir valley is current in the country:—Long, long ago, the country called Kashmir, was an extensive lake, the name of which was Sahtisar. A numerous population dwelt on the surrounding mountains. In process of time, the beautiful waters of Lake Sahtisar became infested by a terrible monster, called Zaldeo, which first destroyed all the fish in the lake, and then, emerging from its placid waters, began to attack and devour the inhabitants of the mountains. In great consternation, they fled from their happy homes, and sought safety among the fastnesses of the mountains. In

their retreat, they came upon the abode of a Rishi, or holy man, whose name was Kashaf. They told him their sad story. He heard their doleful account of the awful monster and his murderous doings. So great was the sanctity of this Rishi, that God had given him power to work miracles. Accompanied by a great crowd of fugitives, the Rishi directed his steps to the north-west end of the Wulur lake, and here he struck the ground violently with his trident. The earth opened, and, in course of time, the whole waters of the Lake Sahtisar disappeared, and again reappeared near to the Krishan Ganga. In consequence of the draining of the lake, the monster Zaldeo perished, to the great joy and safety of the terrified mountaineers, and the valley was henceforth called Kashafmar, the place or country of Kashaf, in honour of the Rishi.

It has been roughly calculated that the plains of Kashmir, including the Karewahs, or elevated alluvial plains, comprise an area of at least 650 square miles, while, on the surrounding mountains, there is another area of 150 of pasture land; the population is estimated at 425,000. The main valley is the far-famed Vale of Kashmir, where are laid the principal scenes in *Lalla Rookh*. This portion has been compared to a gem, with the surrounding Himalayas as a casket, and is regarded as a Holy Land, alike by Hindoo and Mohammedan. The Hindoo considers it to have been the first paradise in the Maha Yogu, or golden age, and the Moslem has a similar belief.

Here the luxurious Mogul Emperors had their summer retreat, and here they built the palaces and planned the gardens that combine, with other attractions, to make Kashmir the 'most delicious spot in Asia or in the world.' 'It is,' says the anonymous writer of the pamphlet on Kashmir, 'a land flowing with milk and honey, like the land of Canaan, a good land, a land of brooks and of water, of fountains and depths that spring out of valleys and hills; a land of wheat and barley, and vines and fig-trees and pomegranates; a land where bread may be eaten without scarceness, and men may not lack anything in it; a land of mountains and lakes, of broad forests and fertile plains; a land of fruits and minerals, of temperate climate, and delicious water and air, of large cities and populous villages; but a land of ignorance and wickedness, where Satan reigns and "works in the children of disobedience," where "every prospect pleases, and *only man is vile.*"'

Till 1840 few Europeans had ever penetrated the valley. St. Xavier, together with Goez, attended Akbar to Kashmir about 1594, as Bernier, a French physician, did Aurungzebe, nearly a century later. About one-seventh of the whole population are Hindoos, the rest are chiefly Mohammedans.

Among the many interesting topographical features of the valley may be classed the Karewahs—elevated alluvial plains, varying in height from one to two hundred feet, and in length from two to

five miles. They are separated by wide and deep ravines, cut by the streams from the adjacent mountains, and, with the great mass of shingle everywhere observable, tend to confirm the truth of the local legend that, in bygone ages, the valley formed a vast mountain lake. These Karewahs are formed of lacustrine clay, and, when watered and cultivated, yield abundant crops of wheat and barley.

Kashmir is richly wooded, especially on its northern slopes. The pine, fir, cedar, willow, poplar, apple, pear, apricot, walnut, chestnut, and pomegranate flourish luxuriantly, while the rhododendron reaches a height of from forty to fifty feet. The vine may be seen in some parts of the valley in a wild state, hanging in beautiful festoons about the trees of the forests. No species of palm grows in Kashmir. When, therefore, Moore in his *Lalla Rookh* speaks of the palms of Baramula, his botanical topography is at fault. The famous saffron fields of Kashmir cover an area of ten or twelve miles. When the season is dry and warm, about 18,000 pounds weight of saffron is produced, in value about £30,000 sterling. Rice is the staple grain cultivated in the valley, and the inhabitants live chiefly upon it. Rice-land is regarded as the most valuable, the saffron fields alone excepted.

Kashmir is everywhere famous for its shawls. It is reckoned that there are 23,000 shawl-weavers in the valley, who are all Mussulmans, and are, both



physically and morally, the most miserable portion of the population. The native Government has a monopoly of the trade. A first-rate shawl-weaver does not earn more than from fourpence to five-pence of our money a day.

The Kashmiris are physically a fine race, tall, strong, and well developed. Their features are Jewish in character; and it is very remarkable, Dr. Elmslie remarks, that the old temples of Kashmir bear a strong resemblance in plan to the temple of Jerusalem. Moorcroft thus describes the Kashmiri: 'Selfish, superstitious, ignorant, supple, intriguing, dishonest, and false, he has great ingenuity as a mechanic, and a decided genius for manufactures and commerce; but his transactions are always conducted in a fraudulent spirit, equalled only by the effrontery with which he faces detection.' This description agrees with Dr. Elmslie's estimate. He says: 'The chief features of the Kashmiri character are timidity, cowardice, laziness, gaiety, mendacity, faithlessness, dexterity, inventiveness, and good mental powers.'

Kashmir, at one time, was celebrated for its learning. In it was held one of the three great Indian Buddhist councils, which sent forth five hundred Buddhist missionaries to convert Thibet. In the valley there are several very fine temple ruins, which indicate 'a degree of greatness, resource, and prosperity which contrasts painfully with the present condition of meanness and wretchedness

which is observable throughout the greater part of the province.'

The Church Missionary Society made an effort to introduce Christianity into Kashmir in 1854. During that year, an exploratory journey was undertaken by Colonel Martin, who, after thirty years of service in the Indian Army, not only gave most liberally of his substance for the work of missions, but went forth himself as a missionary. Col. Martin, in company with the Rev. R. Clark, travelled throughout the length and breadth of Kashmir, and in their evangelistic efforts they met with less opposition than might have been expected. The great obstacle they had to contend with was the irreligious and immoral lives of many of their own countrymen who visited the valley. The Society, however, was unable to establish a mission in Kashmir at that time. The Punjab Mission had been but lately commenced at Umritsur and Kangra. Peshawur, Mooltan, Dehra Ishmael Khan, and Lahore, were as yet unoccupied.

In 1862, after these Punjab missions had been established, attention was again directed to Kashmir. In the autumn of that year, the Rev. W. W. Phelps, Chaplain, visited the valley, accompanied by a missionary. In the spring of 1863, the Rev. W. Smith of Benares was appointed to Kashmir. It was in the autumn of that year that the effort was first made to remain in the valley the whole year round, but the time had not yet come for the

establishment of a permanent mission in Kashmir. On the return of the missionary and his family in the spring of 1864, his residence in the city was objected to by an excited mob. Through God's mercy, the disturbance was soon quelled, and the missionary remained in the city, with the full consent of the English Resident. At the close of the season, however, as in former years, he was obliged to leave the valley. During 1864, there was a hopeful movement in favour of Christianity in Srinagar; whole families came forward and asked for baptism. On this becoming known, bitter persecution followed, and false charges were brought against inquirers; some were beaten, others were imprisoned, others had logs of wood tied to their legs, or were otherwise cruelly treated.

In 1865, under such apparently unfavourable circumstances, Dr. Elmslie commenced his work in Kashmir. His journey from Lahore to Srinagar, his medico-evangelistic labours by the way, his reception by the people, his hopes and fears, his joys and sorrows, are all graphically related by the Doctor himself in the following chapter.



### III.

## First Year's Work in India.

'Yonder, where I must go, the earth and heaven  
Another aspect will appear to wear ;  
A fiercer sun will shine in noonday splendour,  
And stars unknown light up the darkness there.

Remain, remain ! I hear my dear ones calling ;  
Remain among us, loved and loving, still !  
Tempt not the wild waves of the stormy ocean,  
Tempt not the blinded heathen's wilder will !

Yes, I would stay, did not I hear another,  
A heavenly call, which tells me to depart ;  
His voice, who lingered not, when love and pity  
For helpless, hopeless sinners filled His heart.

His voice I hear,—and theirs, the lost, the dying,—  
The wail of heathen anguish o'er the sea !  
They must not perish thus, unheard, unheeded ;  
The slaves of Satan must be yet set free !'

*Hymns from the Land of Luther.*



## CHAPTER III.

### FIRST YEAR'S WORK IN INDIA.

IN September 1864, Dr. Elmslie sailed for India, and was received at Calcutta by the Rev. E. C. Stuart. After spending a few months in visiting the Medical Colleges of Calcutta, Agra, and Lahore, and acquiring considerable experience in some of the larger towns of the Punjab, he reached Srinagar, where it was resolved his mission should be located, on the 4th of May, 1865.

We shall follow him in his missionary career, from year to year, and from place to place, by means of those

‘ Fallen leaves that keep their green—  
The noble letters of the dead.’

‘ SRINAGAR, 21st June 1865.

‘ MY DEAR MR. BELL,—As, through the kind providence of God, I have safely reached this, my far-off destination, and have got my work in Kashmir initiated, I have a desire to inform you how greatly the Lord has smoothed my way hitherto.

‘ I, my two native assistants, and Kashmir catechist, left Lahore about the middle of April. Our



route lay by Rawul Pindee and Murree, which, as you know, are situated in the north of the Punjab. Nothing of great interest befell us till we entered the territories of the Maharajah of Jummoo and Kashmir. So bitter had been the opposition of the native authorities to the praiseworthy efforts of Messrs. Smith and Clark, ordained missionaries of the Church Missionary Society, on two previous occasions, that I fully expected to meet with similar treatment in my medical missionary operations. But I was most agreeably disappointed. With one exception, the people heard us gladly; and not the people only, but the public functionaries also. When I say we were listened to gladly, I mean that the people were most attentive, and appeared to relish what we said and did. One here and another there, in the swarthy company, would exclaim, "*Durust, durust, Thik, thik*,"—expressions which signify, "correct, right."

‘Before setting out, I had formed a plan which I found to work admirably, the violation of which on one occasion was the cause of our being deprived of the opportunity of speaking to the natives about Jesus, and His unutterable love to men.

‘My plan was the following:—As soon as we arrived at a village where we were to rest for a short time, or to pass the night, I had the Tekeedar, or principal man of the place, brought to me. He was then informed how many coolies we should require for our next march (all our luggage was

carried by coolies or porters); and that, as I was a Hakim (physician), I would be very glad to see and prescribe for all the sick folk in the village and neighbourhood, if he would bring them to my tent at such and such an hour. This latter piece of intelligence was invariably received with manifest pleasure. You will observe, that before I attempted any regular missionary work, I took good care to let my character of Hakim be well known both to people and magistrates.

‘The only place where we were prohibited from speaking to the people about the “*Injil*” (the gospel) and “*Isa Masih*” (Jesus Christ) was a village where my catechist, rashly and hastily, began addressing a group of natives whom we passed as we entered, and one of whom, unfortunately, happened to be the Sirdar, or chief man. With that single exception, we were allowed to address the people on divine things, and to give, to those whom we found able to read, religious books.

‘At the hour I had fixed, and long before it very often, the sick were brought to the door of my tent. The coolies who had carried our baggage from the last halting-place, being still with us waiting to be paid for their day’s work, were placed near the sick; a portion of Scripture was then read to the interesting company by the catechist, who can do that work excellently, being a good Christian, and a Kashmiri by birth, so that he is able to speak to the people in their own tongue of the wonderful works of God.

I always saw that the passage of Scripture read and commented on was one that contained the thick cream of the gospel,—man's lost condition by nature, and redemption only through faith in Christ Jesus, God's own Son. After the address I paid my coolies, and let them return to their own homes. By adhering to this plan, no fewer than four hundred coolies, besides the sick, heard the gospel during our march from Murree to Srinagar. Many of them, doubtless, had never heard of the sweet name of Jesus; and, it is sad to think, many of them in this life will never hear of it again.

‘The coolies away, I then proceeded to treat the sick who were present, as well as the shortness of my time and the scantiness of my resources by the way would permit. Sometimes there were as many as forty sick persons at my tent door, both men and women. Their ailments consisted chiefly of febrile, ophthalmic, and cutaneous disorders. At one resting-place I was surprised by the large proportion of fever cases, and the presence of large goitres in the patients. The fever was of the intermittent type.

‘The march from Murree to Srinagar I greatly enjoyed, the scenery being in some parts beautiful, and in others grand, the climate being all that could be desired. The Jhelum, which is the principal river of Kashmir, is navigable from Baramula to Srinagar, and eastward as far as Islamabad. On arriving at the first-mentioned place, which is a

town of some 6000 inhabitants according to hearsay, we hired two large boats to convey us and our belongings to the capital of Kashmir. We were about three days in sailing from Baramula to Srinagar, and the whole expense, for the whole company, was six rupees, or about twelve shillings; not a very large sum, certainly. I forgot to tell you that a coolie's pay is about sixpence a day, and with that he considers himself well paid.

‘From Baramula westward, the bed of the river Jhelum is exceedingly rough, and the current very rapid, owing to the great fall or incline. If my memory serves me rightly, according to Cunningham, it is as much as thirty feet a mile. From Islamabad in the east to Baramula in the west, the whole length of the vale of Kashmir, the incline is very very small indeed—only three feet a mile; so that the great body of water flows along very gently, and thus the river is navigable.

‘We landed at Srinagar on the 4th of May, nineteen days after the valley is open to foreigners. You are, I daresay, already aware that no Englishman or European is allowed to remain throughout the year in Kashmir. Two reasons are assigned for this prohibition. One is, that as great cruelty is exercised towards the natives during the months when the taxes are levied, the Maharajah is desirous that the eye of no stranger should look on his cruelty and tyranny. The other reason assigned is, that the Maharajah has issued this prohibition

for fear of Englishmen acquiring a permanent footing in his country. Whatever may be the real reason, there the *veto* stands, and it will very materially interfere with our medical missionary operations, as you can easily see.

‘My first work on landing was to look out for a conveniently situated bungalow, or house. You must know that the Maharajah *partially* treats every foreigner as if he were his guest. A house, such as it is, is provided for the stranger as long as he remains in Srinagar. These houses, or bungalows, of the Maharajah’s are rickety, tumble-down affairs; but, as the climate is propitious, they are habitable. It was absolutely necessary for the success of my work, that I should either live in the city itself, or in its immediate vicinity. In the city no European is permitted to reside, so that I had to look about for a house as near to it as possible. The Maharajah’s bungalows most conveniently situated were either already occupied or were reserved. Between the bungalows of which I speak and the city, there was a portion of a bungalow belonging to a native merchant, which I could rent if I chose. The accommodation was both scanty and inferior; but it being the best I could find for my work, I struck a bargain with the man to let me have it at the rate of £2 a month. There is one large room, which serves me as drawing-room, dining-room, bed-room, sitting-room, and consulting-room. Round this large room there are three

verandahs, one on each of the three sides; and connected with the three verandahs are four very small closets. One of the verandahs has been fitted up as a dispensary, where all the medicines and instruments are kept; another has been converted into a small hospital, for I resolved that, if I should have but two rooms at my command, one of them should be an hospital, or at least form the nucleus of one. I daresay you are smiling at the idea of converting a verandah into an hospital; but this is Asia, and people, I have already seen, are obliged to work with very inferior tools here, if they wish to accomplish something, which, otherwise, would remain for ever, or for a long time, uneffected. I resolved, therefore, to have, from the very outset, a room capable of accommodating one or two patients, and which I might dignify with the imposing name of hospital. I must confess, however, that the propinquity of my bed-room to the verandah hospital is very far from being desirable, as my sleep is very apt to be broken by the expression of pain on the part of the patients. Last Friday night this very thing happened. A poor coolie, who had been accidentally shot in the thigh, and who was brought to me only in time to rob me of a night's sleep, and to die in my verandah hospital, passed a very noisy night. The remaining verandah is allotted to the servants as a sleeping-room. Of the four small closets, one is the catechist's bed-room, another a bath-room, another a store-



room, and the fourth I have reserved for the accommodation of such eye-cases as require to be constantly under the charge of the Surgeon. As you ascend to my dwelling, you pass a long verandah on your right hand, and this I have had fitted up as the patients' waiting-room. It is capable of affording accommodation to a hundred patients. In this verandah, every morning at seven o'clock precisely, the patients having all assembled, a portion of God's word is first read, either by myself or the catechist, and then expounded by him, for I am not sufficiently acquainted with the language to enable me to undertake that part of the work. After reading and exposition a brief prayer is offered up, after which the work of the doctor begins.

'From the very first, the average daily attendance of patients has been gradually increasing, until, from being only five the first day, they reached this morning the large number of eighty-seven; and what is very encouraging is, that the women come to me in great numbers; indeed, there are now about as many women present as men. Having, I may say, to do everything myself in the way of treatment, and compounding and dispensing the medicines, and being, besides, as yet very imperfectly acquainted with the language, I find it impossible to treat eighty patients at one time, without completely exhausting myself. I have therefore resolved to take the women one day, and the men



the next. Some patients I shall have to see daily in addition.

‘On account of the dirty habits of the people, skin diseases meet you at every corner, and for the same reason eye diseases are very rife. Cataract is exceedingly common; up to this time, however, only one case suitable for operation at present has presented itself, and I purpose extracting the lens to-morrow. The patient is the wife of a goldsmith in the city, who saw me one day in his neighbourhood distributing tracts and copies of the Gospel, and telling the people I was a Hakim, and would be happy to see them at my bungalow if they were sick. The man desired us to go to his house, which he permitted us to enter. There I saw his wife, and made arrangements for the operation. I have removed successfully two large cystic tumours, one from the thigh, the other from the cheek. Iridectomy for opacity of cornea I have once done, and the day before yesterday I performed resection of the wrist-joint. To-day the patient is doing well. For nothing am I so grateful to Mr. Syme, that great Surgeon, as for his excellent remarks on the diagnosis and treatment of joint diseases. It is an interesting fact in the history of chloroform, that although this is, so far as I know, the first time that that invaluable anæsthetic has been employed in the valley, the natives are taking to it very kindly. They manifest great surprise at its wonderful effects. Whenever I have had occasion to administer it, not

the least objection has been offered. I ask the patient or his friends, if he or they would like me to give something which will effectually prevent the feeling of any pain during the operation; and the invariable reply is, that he or she, as the case may be, wishes to have such a medicine. In all the cases in which I have administered chloroform, nothing the least untoward has occurred, thanks to what I learned in Professor Simpson's class, and saw while his House Surgeon.

'23d June.—I have just received a supply of vaccine matter from Dr. Dallas, Inspector of Prisons in the Punjab. One of the leading Moonshees, or clerks of the Maharajah, sent his two children to me to be vaccinated some time ago; but as the lymph was from the plains, it failed, and I was obliged to send to one of the hill stations for a fresh supply. It would be a great matter were vaccination to become general in Kashmir, as, according to current report, thousands are carried off annually by small-pox alone.

'I was much interested by your last year's report of the Edinburgh Medical Missionary Society. The good work is steadily though slowly progressing. Of late I have been very much impressed with the thought of the absolute necessity of God's blessing on our work as medical missionaries, if our labours are to be followed with the conversion of souls; and I believe God has put it into my mind to suggest to you that our Society at home, all friends of medical

missions, and all medical missionaries themselves, should set apart some week, or portion of a week, towards the close of this year or the beginning of the next, for special prayer on behalf of the parent Society and all its schemes, and of the foreign work and all its interests. I feel persuaded, that if such a season of united special prayer were spent by us, we should individually reap a rich spiritual blessing, and our work would greatly flourish in consequence. From the sure promises of God, we know right well that such certainly would be the result. I merely throw out the suggestion, and leave it with you.

‘I desire to be remembered to those of the Directors of your Society with whom it was my privilege, while in Edinburgh, to be acquainted; and with very kind regards to yourself, yours, etc.,

‘W. J. ELMSLIE.

‘*P.S.*—The Lord Bishop of Calcutta (the Right Rev. Dr. Cotton), while in Kashmir, twice visited my dispensary, and saw my operations. The following is a copy of the opinion he expressed respecting the work:—

“During my present stay in Kashmir, I have twice been present at Dr. Elmslie’s reception of patients, and bear willing testimony to the great interest and practical usefulness, as well as to the wise and Christian character, of his proceedings. He presents Christianity to the people in its most obviously beneficent aspect; and for this union of care

for men's souls with the healing of their bodies, the Gospel narrative furnishes us with the very highest justification and precedent. It is but little that we can at present do to make known to the people of this country the blessings of Christ's salvation; but I quite believe that Dr. Elmslie is knocking at the one door which may, through God's help, be opened for the truth to enter in. I heard two Hindustani sermons from his catechist, addressed to the sufferers from various maladies, who were gathered in the verandah; one on the Lord's Prayer, and the other on the parable of the sower. Both were excellent, simple, unpretending, suited to the hearers, placing before them plain Christian truth, and without any offensive remarks on their own religions, or the very slightest political allusion.

“The fact that there are not (and, under present circumstances, apparently cannot be) any properly educated doctors in Kashmir, makes Dr. Elmslie's presence here an act of Christian benevolence, quite apart from its missionary character; and I cannot but hope that this, joined to the quiet efforts of the chaplain to keep alive in English travellers a feeling of Christian faith and responsibility, will, at least, remove from the minds of the people any prejudice against the Gospel, which may, I fear, have been excited by the too frequent misconduct of Englishmen visiting the valley.

“On all accounts, I heartily commend Dr. Elmslie's efforts to the sympathy of all thoughtful

persons, and I feel sure that he will be guided by prudence as well as by zeal, and will not forget what is due to the wishes of the Government of the country, while, at the same time, he will, of course, maintain the directly Christian character of his work. (Signed) ‘“ G. E. L. CALCUTTA.

‘ “ SRINAGAR, KASHMIR, *May* 29, 1865.” ’

Referring to the political hindrances which beset mission work in Kashmir, the late excellent Bishop remarked in his diary :—

‘ The people nearly all seemed in a state of dirt and squalor ; and, certainly, the work of christianizing such a population seems at present, humanly speaking, impossible, no European being allowed to stay in the valley during the winter, so that any little good which might be done is annually suspended for some months. The case seems one in which we can only say, “ Oh that Thou wouldst rend the heavens, and come down,” and leave in God’s hands the means of rescuing these crowds from their miserable condition.’

Again, after witnessing Dr. Elmslie’s reception of patients, the following entry appears in the late lamented Bishop’s diary :—

‘ Altogether, considering the ignorance and wretchedness of his patients, and the entirely disinterested character of the Mission, the scene appeared to me most interesting and edifying, and could not fail to remind me of Him who went

about all Galilee preaching the gospel of the kingdom, and healing all manner of sickness, and all manner of disease, among the people.'

In accordance with the suggestion made by Dr. Elmslie in the foregoing letter, the Directors of the Edinburgh Medical Missionary Society issued an invitation to the friends at home and abroad, to join them in observing Wednesday, the 31st of January 1866, as a day for special prayer on behalf of all medical missions. The invitation was extensively circulated, both in this country and in the foreign field. In Edinburgh, three large and deeply interesting meetings were held, at the Society's Dispensary, Cowgate, in the forenoon, in the Religious Institution Rooms in the afternoon, and in Queen Street Hall in the evening. The writer well remembers that day of prayer, as it was observed in Travancore: how his little band of eight native medical missionary students met him that morning, not for study, but for prayer; how, one after another, we afresh dedicated ourselves to God; and, after spending an hour and a half together in earnest prayer for a blessing upon the parent Society, upon our fellow-labourers, and upon ourselves, we went forth strengthened for our work, and greatly refreshed in spirit; and then, on the evening of that day, the congregation met in the large chapel at Neyoor, and there we mingled our prayers and praises with those of fellow-Christians everywhere throughout



the world, for a rich outpouring of God's Holy Spirit upon the Medical Missionary enterprise. These occasions were truly 'times of refreshing from the presence of the Lord,' and their mighty far-reaching results it is impossible to estimate.

As indicating the spirit in which the Indian press regarded Dr. Elmslie's work, the following extract from the *Pioneer* of June 15, 1866, is interesting:—

'Many of your readers will doubtless be glad to know of the good work which is being carried on here by Dr. Elmslie, of the Medical Mission in connection with the Church Missionary Society. He arrived about a month ago, and established himself in a bungalow, just above the first bridge of the city. Every morning he receives there, all the maimed, the halt, and the blind, who choose to come to him for advice and treatment, gratis. Though so recently arrived, his reputation is already great. He has had over fifty patients on some mornings, from all parts of Srinagar, and has been consulted by several of the principal natives of the place.

'His mode of proceeding is as follows:—The poor patients assemble about seven A.M. in the verandah of his house, and are all made to sit down in long rows. A catechist, a native of Kashmir, then comes in, and reads to them a short passage from one of the Gospels, accompanying it with comments in the simplest language, and most familiar style of address. The Doctor forms one of the audience at



present ; but he hopes, of course, to take this part of the work himself, so soon as his knowledge of the language will enable him to do so. After the reading and exhortation, the catechist invites all present to join him in prayer for God's blessing on what has been read and spoken, and on his master's treatment of the various cases entrusted to his care. This service occupies about twenty minutes, during which the silence of the audience is broken only by exclamations of approval and astonishment. The majority of those present may, at least, be said to pay great attention to what they hear. After prayer the Doctor retires to his surgery, and the patients follow one by one to be examined.

‘Most of the cases for which he prescribes are the result, more or less, of dirty habits and poor living. Dr. Elmslie is assisted by two native Christian students ; but his work is increasing so rapidly, that he will have to add an apothecary to his establishment before long.’

#### IV.

### First Annual Report and Correspondence.

‘ Sow with a generous hand ;  
Pause not for toil or pain ;  
Weary not through the heat of summer,  
Weary not through the cold spring rain ;  
But wait till the autumn comes  
For the sheaves of golden grain.

Sow ;—while the seeds are lying  
In the warm earth’s bosom deep,  
And your warm tears fall upon it—  
They will stir in their quiet sleep ;  
And the green blades rise the quicker,  
Perchance, for the tears you weep.

Sow ;—and look onward, upward,  
Where the starry light appears—  
Where, in spite of the cowards doubting,  
Or your own heart’s trembling fears,  
You shall reap in joy the harvest  
You have sown to-day in tears.’

ADELAIDE ANNE PROCTER.



## CHAPTER IV.

### FIRST ANNUAL REPORT AND CORRESPONDENCE.

A FEW extracts from Dr. Elmslie's report of his first year's labours, along with his letters, will enable the reader to form some idea of his abundant labours, trials, and discouragements:—

‘*May 13.*—Felt very anxious this morning, as I had received intelligence that some of the Maharajah's sepoys intended visiting me. Those in authority would thus become acquainted with my proceedings, and I feared the result. We made it a matter of prayer to God, and felt the burden greatly lightened.

‘*May 14.*—Began my Saturday itinerations to-day. We hired a boat, and sailed to a small village, where we had a meeting with the natives, and gave advice and medicine to four of them. I purpose to devote the Saturday afternoons to these itinerations to the neighbouring villages, that the people may hear the gospel in their own tongue, and may know of our dispensary.

‘*May 16.*—This morning the number of patients was thirty, the majority of whom were sepoys. I

begin to suspect that this is the result of some plan to prevent the Kashmiris coming to the dispensary.

'*May 20.*—After this morning's reception of patients, we hired a boat, and set out for a pretty large village, called Hazrat Bal, which is situated on the shore of the large lake, near Srinagar. On landing, a shady tree was selected, near to a Mussulman temple, and there my chair and medicines were placed. While the catechist was giving notice of our arrival, and the object of our visit, I went to see the temple, where I met the principal Mullah or priest, and a few of his subordinates, with whom I had some conversation. On leaving the priests, I found my catechist standing under a shady tree, addressing a numerous company of pale, sick folk, who were quietly seated on the ground around him, listening most attentively to his words. The Mullahs had leisurely followed me; and as soon as they heard what the catechist was saying, they rushed amongst the people, shouting out that they must go away immediately. Their efforts were successful. All left, except one poor woman, who happened to be imbecile. She would not move for them. One priest applied very freely a rope which he carried with him, to those whose movements were slower than he thought they should be; and the only antidote I could think of, for my feelings of sorrow and indignation, was prayer to that God who was seeing all that was taking place against His blessed Gospel. The catechist and assistants knelt with me,

under the shady walnut tree, and we prayed the Lord to forgive these enemies of His truth. Only three sick people received treatment here, after which we made for home, much depressed, but not altogether cast down.

‘*June 29.*—To-day laid up with fever, and obliged to send away the patients who had assembled.

‘*July 11.*—Still feel so weak that I deem a change to another part of the valley necessary, and intend to go as far as Islamabad. I purpose halting at the towns and villages on the way, for the purpose of healing the sick, distributing tracts and Gospels, and spreading the glad news of salvation through Christ.’

Dr. Elmslie derived much benefit from the change, and returned to his work at Srinagar greatly strengthened and refreshed.

‘*August 26.*—Present to-day at the reception; forty-four women and thirty-two men. A native gentleman called in the afternoon to tell me that he had spoken to the Governor of Kashmir about my being allowed to remain in the valley during the winter. I had operated on this man before, and he took this way of showing his gratitude. The Governor informed my friend, that I could not be permitted to remain in the country during the winter, for the following reasons: 1<sup>st</sup>, Because it is contrary to the treaty between Kashmir and the Government of India; 2<sup>d</sup>, Because there is a famine in the country, and I might not be able to get provisions in the winter; 3<sup>d</sup>, Because more than one had lost

his life by remaining in Kashmir in winter ; 4<sup>th</sup>, Because it is entirely contrary to the will of the Maharajah, that Europeans should stay in the country during the winter. Sepoys and others, however, who have received benefit from the dispensary, speak about petitioning the Government that the *Padre Doctor*, as they call me, may be allowed to remain.

‘ *September 23.*—I heard good news to-day from my catechist. He tells me that my pundit had expressed to him his firm belief in the authority of the Gospels, and that Jesus Christ is the Son of God, the Saviour of men. He said he was afraid to make a public profession of his faith in Jesus, as it would involve his family in difficulties. I was not unprepared for this admission on the part of my pundit. May the Lord strengthen him to give up all for Christ! He is at present engaged at home by himself, in translating the Gospel of John into Kashmiri.

‘ *October 6.*—Was called to-day to see the Maharajah’s chief military officer. He confirmed the report already referred to, that the sepoy were prohibited from attending the dispensary. I could not help remarking, jocularly, that, according to our European notions, the Maharajah’s army must be in a state of insubordination from the Colonel downwards.

‘ *October 16.*—Was requested by the Brahmin who is at the head of financial affairs in Kashmir, and on whom I had operated a short time before, to go with



him and see one of the female members of his family, which I was very glad to do.

‘*October 17.*—To-day left Srinagar. The Brahmin who called yesterday accompanied me out of the town, and expressed himself as very grateful for the benefits he had received from the dispensary. I purpose following the same plan as when entering the valley,—having receptions and addresses at each of the halting-places.’

During Dr. Elmslie’s first season in Kashmir, he treated 2295 patients, 1502 of whom were males, and 793 females.

Umritsur was fixed upon as Dr. Elmslie’s headquarters during his enforced absence from Kashmir, and there he carried on his work, perfecting plans for his missionary campaign in Kashmir next season, co-operating with his brethren in evangelistic work, and healing the sick, till, in April 1866, he was permitted to return to Srinagar. Umritsur, with its population of upwards of 135,000, is one of the most important central missionary stations in North India, and a better locality for a permanent medical mission could hardly be desired. In No. 25 of the Church Missionary Tracts, the following description of Umritsur is given:—

‘As a missionary station, it is, of all others, situated most advantageously for labours amongst the people. The Sikhs, as a body, live either in it, or in the towns and villages around. Umritsur

is their holy city, as Benares is that of the Hindus. Their sacred tank, and their marble temple, with its golden roof, are situated in its midst. The Sikhs always resort to Umritsur on their great holidays, when crowds assemble to pay reverence at their shrine, and to bathe in the supposed holy water of the tank. The very name of their city, Umritsur, "*the fountain of immortality*," shows the importance they attach to it.

‘But besides being a sacred spot, it is also the largest commercial city of North India. Its commerce extends to most parts of the world. It is visited even from England and France, on account of the Kashmir shawls, which are made both there and in its neighbourhood. The merchants of Persia, Affghanistan, and Turkistan, meet there, with the merchants of Thibet, and of very many parts of India. Large caravans, laden with rich goods from every part, assemble there, in great numbers, every year. It is therefore a locality peculiarly favourable for the work of missions; for the Gospel, heard or distributed in the streets of that city, finds its way from thence into many distant countries.’

In Umritsur, and in the surrounding district, the Church Missionary Society has a flourishing mission. In the city there is a large native congregation, an important collegiate school, and five branch schools in different parts of the town; in like manner, for the benefit of the female sex, eight girls’ schools have been established in various quarters of the city, and

three normal schools, supported partly by funds raised as a memorial of Lady Henry Lawrence, and known as 'The Lady Henry Lawrence Memorial Schools.'

There are two European missionaries and two native ordained ministers at Umritsur. One of the latter, the Rev. Daoud Sing, a Sikh, was baptized at Cawnpore before the annexation of the Punjab, and ordained to the ministry in 1854. The other, the Rev. Inad-ud-din, a Mohammedan, ordained to the ministry in 1868, has done good service to the cause of the Gospel by his literary labours, and by his controversial writings, which expose the errors of the Mohammedan faith, of which, at one time, he was a bigoted adherent.

To this interesting and important missionary station, Dr. Elmslie returned at the close of each season's labours in Kashmir; and from thence he wrote the following letter, addressed to Dr. Cleg-horn, in which he reviews his first six months of missionary service at Srinagar. The letter is dated Umritsur, January 23, 1866:—

'It would have afforded me unbounded pleasure to have met you, and talked over with you the concerns and prospects of the mission, of which you have the honour of being the father, and I that of being the agent. Doubtless you have seen all, or most, of what I have written of the interesting work in which I was engaged last season; and I daresay

you, along with others, have thought that I might, and ought to have written a great deal more than I have done respecting that work, in which I know you take such a lively and prayerful interest. But the truth is, that things are so uncertain in Kashmir, that I did not wish to write hastily about a country of which, necessarily, I knew so little last season.

‘I need hardly tell you that my labours last year were legion; for, in the first place, I knew almost nothing of the dialects spoken in India, and had to initiate everything. It is unnecessary to tell you about native assistants, how stupid they are, and how their stupidity would be increased by my ignorance of the language and of the native character. But I am extremely happy and thankful to be able to say, that the season passed by without our committing any grave mistake in a medical point of view.

‘As was to be expected, our work last season was chiefly initiatory and pacificatory. . . . I had to act with the greatest caution and circumspection, looking to God for that wisdom which cometh down from above. At the outset of the work, I had one or two difficulties to surmount; but, with God’s help, these were overcome, and then the work progressed quietly, steadily, and unopposed, so far as outward and determined opposition on the part of the Government was concerned. . . . As to the people of the valley, they are fearfully degraded in every respect. Their poverty and physical wretchedness

are something indescribable, but their moral and religious condition is not only almost inconceivable, but well fitted to make even the hardest heart bleed for them. The great mass of the people are not much raised above the beasts that perish, while nothing is done to elevate them from this degraded state. The greatest severity is exercised by the native Government towards the people. The natives, who are chiefly Mussulmans, pretend to be comparatively friendly towards the Christian religion; but this we know, from the spirit and genius of Islamism, is a mere pretence. The truth is, that the natives long to be under British rule, and make no secret of their heartfelt longing; and they take this way of ingratiating themselves with the Sahib Log. I found the people, in general, exceedingly willing to listen to us whenever we read to them, or addressed them on the doctrines of Christianity. Still, we must not be deceived by this remarkable and unexpected readiness of theirs to listen to divine truth, and we must not take it all for genuine.

‘As to spiritual fruit from last season’s labours, I have very little certain to tell you. Many manifested great interest in the Gospel, and used frequently to come to read and converse with us on the sublime and gracious truths of our blessed religion; but, with the single exception of my Kashmiri pundit, a Brahmin, I have very little to say. Of my pundit, I am really very hopeful. I do think the Spirit of God is dealing with him. He

has confessed his belief in Jesus as the Son of God, the Saviour of the world, and his Saviour. But he says he is afraid to make a public confession to this effect, as it would certainly expose his family to great persecutions, as matters now stand in Kashmir. I earnestly solicit your prayers for Kashmir and the Medical Mission, that its labours may be blessed with spiritual fruit, to the praise and glory of God. . . .

‘We had a most delightful week of prayer the week before last. We felt indeed, that the Lord was in our midst. We shall expect great blessings after such united supplications on the part of God’s people, according to His own gracious promise. On the 31st inst. we are to have another day for prayer on behalf of medical missions, according to the appointment of the home Society. Would that God would pour out His Holy Spirit on our Universities, that men may come and offer themselves for this glorious work!’

We shall close our review of Dr. Elmslie’s first year of missionary service in India, with another letter, written from the same place as the foregoing one, and addressed to the same warmly attached friend. It is dated April 2, 1866, on the eve of his departure for Kashmir:—

‘Many many thanks for your most welcome letter of the 13th February. It was “good news from a far country.” The various items of news were full



of interest to me, and, had time permitted, I should have commented on the details *seriatim*; but, as I leave to-morrow morning, God willing, for Lahore, on my way to Kashmir, and as I have one or two additional particulars to communicate to you respecting my work here, I shall forego this pleasure at present, hoping that I may find a spare moment soon.

‘I brought my operations here to a close a short time ago, just immediately before we had our last meeting of Committee. One day, while I was engaged in giving my lecture on Chemistry, which I continued to do till the last, two of the Honorary Magistrates of Umritsur waited on me, as a deputation from (what we should call) the Town Council, to request me to prolong my stay in Umritsur. I need not say that this was exceedingly gratifying to me, as a doctor and as a Christian; and my heart was filled with gratitude to our heavenly Father, who had graciously granted me such favour with the very people whose temporal and spiritual welfare are so dear to my heart. Thinking that I was connected with the Government, and that I was about to leave Umritsur on account of a Government order, the deputation said that they were prepared to draw up a petition to Mr. Egerton, the Commissioner, and to have it signed, soliciting him to use his influence in getting the order for my departure cancelled. I explained all to them, and expressed my sorrow at not being able to be in two

places at the same time, but that I felt it to be my duty to go to Kashmir, where my proper work lay. The time may be near when we shall see a large Medical Mission Hospital in Umritsur. There is room and need for it. . . . Just another item of news about our pet, and I must have done. Sir John Lawrence has sent a message to Mr. Macleod, the Lieutenant-Governor of the Punjab, to request the Resident, this year, to inform the Maharajah of Kashmir, that his hostility to Christianity is not neutrality, and that his policy towards missions is unworthy of a prince of his enlightened views. This is the spirit of the message, but not the very words. "The Lord reigneth!"



V.

Second Year's Labours.

' God's world is bathed in beauty,  
God's world is steeped in light ;  
It is the self-same glory  
That makes the day so bright,  
Which thrills the earth with music,  
Or hangs the stars in night.

Man's world is bleak and bitter ;  
Wherever he has trod,  
He spoils the tender beauty  
That blossoms on the sod,  
And blasts the loving Heaven  
Of the great, good world of God.

And yet God's world is speaking ;  
Man will not hear it call,  
But listens where the echoes  
Of his own discords fall :  
Then clamours back to Heaven  
That God has done it all.'

ADELAIDE ANNE PROCTER.



## CHAPTER V.

### SECOND YEAR'S LABOURS.

THE following letter, addressed to Mrs. Cleghorn, dated Srinagar, Kashmir, 5th September 1866, introduces us to the second year of Dr. Elmslie's labours in Kashmir:—

‘ Your letter of the 13th June last, was a very great treat to me ; but, let me say this, that I did not need your letter to remind me of you : for there, in the corner, are the two pillows which you kindly made for me with your own hands, before I left Calcutta ; and yonder, in that other corner, is my silk umbrella, which you also very kindly covered for me. So you see, whether I am moving about, umbrella in hand, or resting on my cot, I have remembrances of you. Then, besides these, there is the ever-green memory of those delightful meetings we had for prayer and praise, on the Sunday and other evenings, in your house, in the upper room. Has not God heard the prayers we then offered up to Him with our hearts ? We know He has, and always will. Of that we may rest fully assured. Let

me solicit your earnest prayers on behalf of poor degraded Kashmir. It makes my heart bleed to think of her political, moral, and spiritual degradation. She is as low as she can get. She lies at the bottom of the pit, and the powerful arm of a loving and Almighty Saviour can alone drag her out of that pit, and place her on "The Rock."

'I returned to Kashmir towards the end of April, and began operations in Srinagar early in May. On the line of march, I followed the same plan as last year,—namely, that of having small receptions for the sick, and for the proclamation of a free and full salvation through our Lord Jesus Christ. We do not engage much in discussion, because I believe, and that firmly, that the majority of bazaar discussions are productive of little or no good. I am of opinion, that the marvellous suitableness of the Gospel scheme of salvation to fallen man's every want, and the stupendous love of God, as manifested in the gift of His only begotten Son, are far more likely to touch the heart, and, through the heart, the head, of these poor perishing heathen.' Not that I don't approve of discussion—I hold that it is indispensable; but I think that the bazaar, in the midst of a crowd, is not the place for it. The inquirer needs to be in earnest in his search after the truth, to appreciate the arguments you bring forward. All our meetings, therefore, are of the quietest nature. We say our say, and the people hear us quietly and attentively. What is more, they hear us from

beginning to end, which the majority of those who listen to the missionary in the crowded and noisy bazaar do not.

‘ A good many more sick attended these wayside receptions this year than last, and it is to be hoped that the seed sown may spring up and bring forth fruit. Philosophers have come to the conclusion, that there is no such thing in the world as the death of force. A force, once created, either remains the same force, or gives rise to some new force. It cannot be that the power of the Gospel, when proclaimed in these dark regions, goes for nothing, and is for ever lost. No, no ! it lives and quickens, it may be secretly, slowly, silently, but nevertheless surely.

‘ I have had my own difficulties since arriving in Srinagar in carrying on my work. They would not let the bungalow I occupied last year. I was obliged, in consequence, to go to a distance from the city, and was very much afraid that this would materially interfere with the poor sick people coming to me. But no, I expect there will be but few short of double the number of patients we had last year. We have had more quiet discussion this year than last. Many copies of the Gospels have been sought, and gladly received. As to my pundit, he is still with me. His spirit is like that of a Christian, but he has not yet had the courage to declare himself on the Lord's side. It is only the fear of the consequences of such a decided step

that deters him from making a public profession of Christianity. I am, just now, busy reviewing the Gospel according to John with him, a work which I pray the Lord may bless to his soul. Pray for the poor Kashmiri pundit. I am going to try to take him with me to the plains. . . . You must have heard of the failure of the Agra and Masterman's Bank. The poor Kashmir Medical Mission has lost its little all in the crash. This heavy loss came to the knowledge of our good Viceroy, who, just at the time we were needing money, sent the handsome donation of 200 rupees to me in Kashmir, through the Resident. When sending me the donation from the Viceroy, the Resident asked if he could help me in any way. I could not allow such a good opportunity to pass unimproved; so I asked him, if he would kindly use his great influence with his Highness the Maharajah, to get a rude shed put up for me, to serve as a dispensary, and another as a little hospital. They are both now nearly ready. So you see, verily, that the Lord reigneth.

'The Rajah of Chumba has just made the handsome offer of 200 rupees a month, a free house, dispensary and hospital buildings, with current expenses, to the Punjab Medical Mission Committee, to induce them to begin a medical mission in his Highness's territory, similar to that in Kashmir. This offer ought to make our hearts rejoice. The Committee are thinking of sending me to Chumba

during the ensuing cold season, and during my compulsory absence from Kashmir, to initiate the work while the Rajah is favourable. Let us, with all our hearts, return thanks to God for this great opening.'

In his Report for 1866, Dr. Elmslie writes more fully regarding his journey to Kashmir:—

'To see a strange route, to spread the news of the existence of the Medical Mission Dispensary, and to scatter on fresh ground a few wayside seeds, which, with the blessing of God, may hereafter spring up and bear fruit to His eternal praise and glory, induced me, this season, to prefer and fix upon the route by Abbottabad. Medical mission operations on the march were commenced at Mozuffera-bad, which is the first town arrived at, in the territories of his Highness the Maharajah of Kashmir, by this route. During our short stay in this town, as many as sixty-seven patients were treated, as well as our temporary wayfaring circumstances would permit. To carry on medical mission operations satisfactorily and efficiently, a fixed habitation is indispensable. Itinerant medical missions, therefore, other things being equal, are inferior, and not for a moment to be preferred to those which are stationary, and carried on in a populous and convenient centre.

'At each of the following halting-places on the line of march, from Abbottabad to Baramula,



receptions were held for the sick: Mozufferabad, Dopatta, Khánda, Kathai Shahdera, and Gingal. 185 patients, of both sexes and of all ages, received advice and medicine at these different stations. Moreover, several of the minor operations in surgery were also performed. Not a few of these 185 patients who received medical aid, had been brought to our camp from considerable distances, there being a remarkable scarcity of even the common native Hakims in those regions. In the various villages where we halted and rested, we were invariably welcomed and kindly treated by the inhabitants. Doubtless, the high value which these rude and simple people set on English skill and medicine, sufficiently accounts for our kind reception.

‘The Rev. T. R. Wade, of the Church Mission, Peshawur, myself, and the native catechist, enjoyed the privilege of holding several interesting conversations with natives on the subject of Christianity; and those whom we found able to read, received, gratuitously, copies of the Gospels, religious books, or tracts. On all occasions, before any medicines were dispensed or advice given, a suitable passage of Holy Scripture was selected, read, and briefly and simply explained, in the hearing of the sick and their friends and relatives; after which, a short prayer was offered up for the divine blessing on the people, the Word read and expounded, and on the advice and medicine about to be dispensed. This was our invariable practice, and, on all occa-

sions, without a single exception, the people listened quietly, reverently, and attentively.

‘When we instituted a comparison between the dwellers on the right bank, and those on the left bank of the river Jhelum, we came to the conclusion, that the former were the ruder and more illiterate of the two, fewer of the former being able to read.

‘On arriving at Baramula, boats were hired to convey the mission party and baggage to Srinagar, where we landed on the 28th of April, after a very pleasant journey from Abbottabad.

‘It is observable with respect to the route by Abbottabad, when compared with that *via* Murree, that the scenery is less picturesque, the road is more exposed to the sun’s rays, and the marches are considerably longer, but fewer in number. On the other hand, the route by Abbottabad is decidedly easier.

‘Our first concern, on landing in Srinagar, was about a suitable and convenient house in which to carry on our medical mission operations. As the house occupied by the mission during the previous year had been in several respects convenient for our work, an effort was made to re-rent it from its owner, a native merchant. Accordingly, an offer was immediately made to this man for his house, which he, however, declined, stating that the local Government had, some time before, condemned his house as being unsafe to live in, and that, consequently,

it was forthwith to be taken down. It may be mentioned that, passing six months afterwards, this same house was still standing, and inhabited. I afterwards learned, that the true story respecting this house was as follows:—As soon as the mission party had quitted the valley at the close of the previous season, the Maharajah's viceroy in Kashmir had given the owner of the house in question to understand, that he was on no account to re-let his bungalow to the Padre Doctor, should he return to Kashmir next year. Failing to procure our old quarters, we directed our steps elsewhere, and at last selected one of the Maharajah's bungalows, set apart for visitors, which appeared to be as suitable for our purpose as any we could see. The house was so situated, that our medical missionary labours could not reasonably annoy or incommode any one. The British Resident, however, on his arrival in Srinagar, raised some objections to our occupying one of his Highness's bungalows for medical mission work. It is gratifying to be able to state that, through the influence of the British Resident, two rude wooden buildings were erected in the immediate vicinity of the city of Srinagar, one to serve as a dispensary, the other as a small hospital. Both erections are extremely rude, and were not quite finished at the end of the season. It is to be hoped that they are but the forerunners of more suitable accommodation, which is a great desideratum, and quite indispensable for the efficient carrying on

both of the medical and missionary part of the work.

‘The bungalow which we selected and occupied possessed no room capacious enough to hold all the sick, whom it was our custom to assemble in one place, to listen to the reading and exposition of God’s Holy Word. To compensate for the deficiencies of the house, the outer covering of a comparatively large tent was pitched on the lawn behind; and here, under its shade, the sick and their friends used to meet daily, for the purpose above mentioned. The inner part of the same tent was also pitched, and formed all the hospital accommodation which we could command. In the case of patients coming from a distance, it was necessary to find lodging for them in the city, where they were daily attended to.’

Regarding the medical work accomplished in Kashmir during 1866, Dr. Elmslie writes: ‘During the past season, with all its difficulties and obstacles, the Medical Mission Dispensary was the humble means of affording physical relief to a much larger number of sufferers than in the previous year: 3365 patients attended the dispensary during this season, showing an increase, compared with the previous year, of 1070. Many of the cases requiring surgical treatment last season, were of a more serious character than those of the first year of the mission. This shows an increase of confidence on the part of the inhabitants of the valley. Several patients who had refused to follow the advice given

them in the season of 1865, returned last year to the dispensary, and willingly submitted to the treatment which had been formerly recommended, and which, in two cases, was of rather a grave nature.

‘During the season, 173 receptions for the sick were held. The smallest number of patients present was on the 5th of May, when the dispensary was opened. The number that day was eight. On the 25th of June, 182 were present, which was the largest number present on any one day. The largest number of monthly visits paid to the dispensary occurred in the month of August, when 3980 visits were made. The total number of visits paid during the season was 15,662. The average number of visits paid by each patient was therefore five. The average daily attendance was 91, and the average monthly attendance was 2610.

‘Several natives were treated in their own houses, and thus, opportunities were afforded of carrying the blessed Gospel into a few heathen dwellings, from which its benign light is studiously excluded. Our visits, on all occasions, appeared to be welcomed and valued. The ignorance, bigotry, and superstition met with, however, were most saddening and pitiable; certainly no agency but that of God’s own Holy Spirit can eradicate these bitter, bitter roots.’

For the professional improvement of his native assistants, Dr. Elmslie conducted classes throughout the season, for the study of Chemistry, Materia

Medica, and Anatomy. He likewise contributed several papers, interesting in a medical and surgical point of view, to the *Indian Medical Gazette*. One, on the Etiology of Epithelioma among the Kashmiris, a disease very common in the valley, is specially instructive.

In reporting his evangelistic operations, during 1866, Dr. Elmslie writes: 'This is the particular feature of our proceedings, which is most distasteful to the local Government of Kashmir. Like all bigoted, illiberal, and tyrannical Governments, the native rulers of the valley thoroughly hate and fear the enlightening and elevating influence of Christianity. Every means is taken advantage of by those at the helm of affairs in Kashmir, to continue and perpetuate the worse than Egyptian darkness that at present prevails in that unhappy and deplorable country. For a native even to inquire about the Christian religion, is still considered a heinous crime, worthy of fines, stripes, and imprisonment. The avenues leading to the mission bungalow were closely watched by sepoy, and, it is well known, that many who were sick and much in want of medical and surgical aid were intimidated and deterred from frequenting the dispensary. This most reprehensible policy on the part of the native rulers of Kashmir renders genuine mission work peculiarly difficult.

'Last summer, an effort was made to get the people to buy, at small prices, the Gospels and



religious books, which, during the first year of the mission, we had been in the habit of giving away gratuitously. This effort, however, failed. Education is at such a very low ebb in Kashmir, and the people have so little thirst for knowledge, that they are not yet willing to pay for books on the Christian religion; consequently, those who were found able to read, and who expressed a desire to have such books, received them for nothing, and, in this way, numerous copies were given away. May God's Holy Spirit be with the readers of these books!

‘The religious exercises of the dispensary were conducted in the same manner as last year. On all occasions, without a single exception, the behaviour of the people was quiet and attentive. In our addresses, seldom was there any express reference made to the absurdities of Hinduism, or to the errors of the religion of the false prophet; we deem such references better fitted for the solitary interview, than for the crowded assembly. We wish our hearers to know what Christianity is, to look at it with their mind's eye, calmly and dispassionately. And, if we know anything of the workings of the human mind, we believe that one of the main ways of effecting this, is not unnecessarily to rouse the prejudices of your heathen listeners. The surpassing reasonableness and excellency of the Christian religion should be the chief theme of the preacher to a crowd of heathens, leaving them to institute a



comparison between their own corrupt and false religion, and that of Jesus Christ.

‘ Another feature of our addresses to the patients in the dispensary, was the total absence of all political references. Such references can do no good, and, therefore, it was deemed wise not to make them. From time to time visits were made to the mission premises, for the purpose of getting further information respecting Christianity. The catechist's wife was extremely useful in this way, among the women. The inhabitants of Kashmir, when out of sight of Government servants, are, generally, very willing to listen to the message of the missionary.

‘ As it was deemed unadvisable, in existing circumstances, to make any decided effort to remain in the valley during the winter months, the medical mission dispensary in Srinagar was closed on the 12th October, and preparations made for our return to the Punjab. Having a desire to visit the valley of Poonch, which forms the territory of His Highness the Rajah Moti Sing, we determined to retrace our steps to the Punjab by that route. Accordingly we travelled by Baramula, Uri, Poonch, Kotli, and Bhimbur, and followed the same plan of holding receptions for the sick, as we had adopted on our entrance journey. The inhabitants of the valley of Poonch appear happier, healthier, and more well-to-do, than those of Kashmir. This is very creditable to the Rajah who rules over that district.

‘Such are the leading particulars respecting another six months of medical mission work in the valley of Kashmir. Unquestionably, much in the local Government, and in the present condition of the inhabitants, is well fitted greatly to discourage us. But, on the other hand, the thought that more than three thousand sufferers from various maladies have either been wholly cured, or their pains alleviated; the thought that the wondrous story of God’s marvellous love to a sin-ruined world, in the stupendous gift of His own dear Son, has become more extensively known, and the absolute certainty of the final triumph of the Gospel throughout the world, should nerve, cheer, and encourage us to advance steadily, joyfully, and believingly in our Divine Master’s great and good work. “As truly as I live, all the earth shall be filled with the glory of the Lord.”’

During this year Dr. Elmslie suffered a heavy loss, in the death of one of his most accomplished native assistants. Alluding to this trial, he writes: ‘While there are unquestionably grounds for rejoicing and thankfulness, God has also seen fit, in His all-wise and inscrutable providence, to remove one from our midst, of whom, in the future, we certainly expected great things. It is our painful duty to have to record one mournful event connected with the mission, which happened at the commencement of last season. Sikandar, by far the most promising of the three native assistants, was

most unexpectedly cut off by fever at Abbottabad, on his way to Kashmir. During his fatal illness, Sikandar gave evidence of his sincere and entire trust in our adorable Redeemer, as his divine substitute for sin. The best thanks of the Society are deservedly due to Col. Rothney, of the 5th Goorkhas, and to Dr. Farrell, Civil Surgeon of Abbottabad, for their unremitting Christian kindness and attentions to Sikandar on his deathbed.'

The report, for 1866, of the Punjab Committee thus, very hopefully, reviews Dr. Elmslie's labours during that year, and indicates a growing interest in, and probable extension of, the work: 'During the past year, His Highness the Rajah of Chumba has applied to the Punjab Medical Missionary Society for a medical missionary; and while, on the one hand, he promises him full liberty to exercise his calling as a missionary, he has agreed, on the other, to pay him a salary of 200 rupees per month, and all expenses connected with his journey out from England, and his employment in Chumba. The Rajah, moreover, will not only provide free quarters for the medical missionary, but will place a suitable building at his disposal for a dispensary, all the expenses of which he will meet.

'If, then, there is cause for discouragement in the circumstance that the Maharajah of Kashmir will not permit the medical missionary to sojourn in his dominions for more than six months each year, and that his servants and others hinder his work

as far as they can, it is a cause of thankfulness to the Disposer of all hearts, that another Rajpoot Chief, of a family not less ancient than the Maharajah of Jummoo, and connected with him by marriage, has thus spontaneously come forward, and offered such liberal terms, in order to secure the services of a medical missionary.

‘The Committee have tendered to the Rajah of Chumba their acknowledgments for his liberality, and have expressed their gratification that, in so practical a manner, he has recognised the principle of religious toleration.

‘The services of Dr. Elmslie have been utilized in Chumba during the past cold weather, and efforts are being made to secure from England the services of an English missionary for this promising field. The Committee desire, in any arrangement they may make, to fall in with the wishes, not only of the Rajah of Chumba, but also of the Rev. Mr. Ferguson, through whom the application to this Society first came, and who, as the pioneer of missionary work in the Chumba territory, has a special interest in this field of labour, which he was the first to enter.

‘The Committee join with Dr. Elmslie in heartfelt thankfulness to the Giver of all good things, that He has been pleased to bless the work undertaken in His name.’

## VI.

### Scheme for Training Native Medical Missionary Evangelists.

‘If it is admitted, as it must be, that it is to a Native Ministry that we must look for the eventual Christianization of India, the teaching and training of Native Evangelists should be regarded as one of the most important duties devolving upon European Missionaries.’

Rev. Dr. CALDWELL, *Missy. S.P.G., Tinnevely.*



## CHAPTER VI.

### SCHEME FOR TRAINING NATIVE MEDICAL MISSIONARY EVANGELISTS.

IMPRESSED with the boundless extent of the field, and convinced of the utter hopelessness of ever being able to supply the evangelistic requirements of India, otherwise than by a native agency, Dr. Elmslie, soon after his return to Umritsur, turned his attention to this most important subject. In the following paper, read before a Conference of the Church Mission, held at Umritsur in November 1866, and likewise before the Punjab Medical Missionary Society the same month, we have the details of his proposed scheme for the extension of Medical Missions in the Punjab, by means of a native trained agency :—

‘The whole subject of medical missions having been discussed at the large Missionary Conference, held at Lahore in 1863, it is presumable that the majority, if not all of those present, are more or less intimately acquainted with the arguments in their favour, and the leading facts in their history. Instead, therefore, of spending the short space of time



allotted to me, in needlessly, and, I might almost say, profitlessly, reiterating these arguments and that history, permit me, rather, to give a practical turn to the subject in hand, by roughly and briefly laying before this Conference, a plan for facilitating the further extension and employment of medical missions in this province.

‘There can be but one opinion as to the great influence and power, either for good or evil, which the thoroughly equipped Physician and Surgeon everywhere possesses, but, more especially, among barbarous and semi-civilized peoples. In the most recent works of Oriental travel,—for example, those of Vambéry and Palgrave,—the authors respectively tell us how considerably they were assisted, and what advantage they gained, by the practice of even a little medicine amongst the rude tribes through whose territories they travelled; and there issues scarcely a single report of missionary labours, in which medicine has been ever so scantily and imperfectly employed, without express testimony being borne to the great assistance and advantage accruing to the mission therefrom. If this holds true of medicine, when practised by those whose knowledge and skill are of the most meagre and deficient extent, how much more effective and helpful, humanly speaking, is medicine likely to prove, when wielded by hands properly trained and skilled in its use, and moved by living, burning love to our Divine Redeemer, and to the perishing souls and

suffering bodies of our fellow-men ! This being the case, it appears to be but the dictate of a wise policy on the part of the Christian Church, besides being in perfect accordance with the spirit of His matchless teaching, to incorporate medical missions in her evangelistic machinery.

‘ The leading Missionary Societies of Great Britain now appear fully to admit the peculiar fitness and desirableness of medical mission agency for some fields of evangelistic labour; and it seems highly probable, that, were funds more abundant, and labourers more numerous than they are at present, or are likely for some time to be, there would scarcely be a single large mission, either in the Punjab or anywhere else in the East, without a medical missionary being attached thereto. Blessed be God, there is no lack of most inviting fields for missionary enterprise; but scarcity of funds, and paucity of suitable agents, are the two gigantic difficulties which our Societies at home have to contend with.

‘ Hitherto, the great majority of medical missionaries now labouring in Syria, Madagascar, India, and China, and connected with the various Evangelical Missionary Societies of England and Scotland, have been educated under the auspices of the Edinburgh Medical Missionary Society, which has done so much for this department of mission agency within the last twenty years. As, however, the pecuniary resources of this Society are comparatively scanty, not amounting to more than about

£1200 annually,<sup>1</sup> and as the number of available men at its disposal is small, there appears to be but little prospect of its being speedily able to supply the many demands of the Punjab.

‘It may interest this Conference to know that, during the past year, I have been asked to aid in establishing a medical mission at no fewer than eight different stations in this extensive province,—namely, those of Umritsur, Lahore, Mooltan, Peshawur, Goojerat, Kullu, Kangra, and Chumba ; and so favourable do the Punjab Medical Mission Committee consider the opening in the last-mentioned place, that they have resolved, with the sanction of the Calcutta Committee of the Church Mission, to locate me there during the current cold season, when I am compelled to suspend my labours in Kashmir.

‘To obtain, at present, European medical missionaries for these numerous stations in the Punjab being all but hopeless, it behoves us to look around and see whether or not we cannot, from the ma-

<sup>1</sup> Although the circumstances of the Edinburgh Medical Missionary Society were such at the time Dr. Elmslie read his paper, they are now much improved, and the prospects of the Society are increasingly hopeful. Its income last year amounted to upwards of £2400. Eleven students are in course of preparation for the work, and several applications are under the consideration of the Board. During the past two years, five have finished their studies, four of whom now occupy important spheres in the foreign field, and the fifth expects soon to enter upon foreign medical mission service in Japan, in connection with this Society.

terial which we already possess, supply, in a great measure at least, our wants in this respect.

‘No one, even for a moment, will maintain that a native agent is, in all points, equal to a European one; but every one will readily admit, that, as to command of the vernacular, and an intimate acquaintance with the manners, customs, and modes of thought of the inhabitants of this colossal Empire, the former is greatly superior to the latter. What, therefore, is lost in one way, is gained in another; and while we are, on no account, to slacken our efforts to import as many European agents as we can find, and as the means at our command will allow, it is manifestly wise and expedient on our part, to do our very utmost to rear an efficient native medical mission agency.

‘Though the different missions in the Punjab are young, compared with those of Bengal, Madras, and Bombay, nevertheless I am led to believe, that, with comparative ease, a little band of students, in every way qualified as to head and heart, could be mustered from among them.

‘Since my arrival in India, I have heard more than one experienced missionary complain of the considerable difficulty met with in finding agreeable and suitable employment for their better gifted and educated converts. If facilities were afforded to this class of native Christians to study medicine, with the view of devoting themselves to missionary work in the capacity of doctors, it is highly probable

that this difficulty would, in some measure at least, be obviated, and much direct Christian power and influence would be utilized and retained within the pale of the Church, which, as things now are, is, comparatively speaking, lost to her; for, I am given to understand, that many of the young native Christians of good parts enter Government employ as writers, etc., after quitting the higher Mission Schools and Colleges, and thus, of course, their direct influence and help are, to a great extent, lost to the Church. This, we think, is more than she can at present afford. She requires to husband her resources, and turn them to the very best account. But further, on this head, in all probability, and that at no very distant day, there will be lucrative and influential openings in the large and prosperous cities of the Punjab, for private native Physicians and Surgeons, who have been educated by European teachers, as we find to be the case in the other large cities of the Empire,—for example, in Calcutta, Bombay, Madras, etc.; and it is, unquestionably, most desirable that these openings, when they do occur, should be occupied by native Christian men, whose example and influence will be on the side of Christianity, and not by heathens, who will perpetuate and thicken the awful surrounding darkness.

‘With respect to the young medical missionary students, it is imperatively incumbent on the ordained missionaries, in charge of the missions

from which they are respectively sent, to see well to it, that they are really converted men, so far as they are able to judge, and have, more or less, a desire to serve God in direct mission work. Next to this all-important and indispensable qualification, I think the medical mission students, before beginning their proper professional studies, should possess a competent knowledge of the English language, and be well grounded in the Hindu and Mohammedan controversies, so that, when favourable opportunities present themselves to them in their intercourse with the people, they may be able, in a clear, quiet, and affectionate manner, to give a reason for the faith that is in them, and to show the glaring errors and absurdities of Hinduism, and the religion of the false prophet. That they may do this efficiently, it is absolutely necessary for the students to be intimately acquainted with their Bibles.

‘But having found young men suitable, so far as we can judge, as to faith and mental attainments, the next question that forces itself upon our notice for consideration is, How are we to give these young men such a medical education, as will be likely to command the respect and patronage of their bigoted and adverse fellow-countrymen? At first sight, this is a question which it is not easy to answer. Medicine, both as a science and art, has, of late years, been so extended and developed in every branch, that we hold it to be now utterly impossible for one man, as formerly, to teach it efficiently and comprehen-



sively. To do so, requires a staff of able teachers, an expensive apparatus, and, more or less, suitable accommodation, all of which would entail such an enormous amount of expense, as would put it completely out of our power to possess an establishment, solely and exclusively, for medical mission purposes. But, most fortunately for the feasibility of our scheme, such an establishment already exists, and we need only to avail ourselves of its advantages, to procure from it all that we can desire.

‘In the Government Medical College, Lahore, with its experienced and Christian principal, Dr. Scriven, and his able colleagues, we possess a Medical School in every way suited to our present purpose. So much regarding the medical mission students, and how they are to receive a medical education that will really fit them for the very responsible duties of their profession.

‘But further, with whom are the medical students to reside, during their stay in the capital and attendance at college? Who is to be their helper, counsellor, and true friend, when they are far away from those who had previously been all that to them? And who, above all things, is to cherish the missionary spirit in them, and show them how to apply their medical and surgical knowledge and skill to the spread of the Gospel? It appears to me, that no one is nearly so well qualified for this most important work, as one who is himself performing the functions of the medical missionary. In addition



to the discharge of this duty, the medical missionary would have ample time to carry on extensive medical mission work in Lahore. Indeed, for the proper and complete training of the medical missionary students, it is unquestionably indispensable that he should do so. As some difficulty may be experienced, at least for some time, in finding a suitable agent for this important post, and as the necessary funds for carrying on this part of the present plan may not be realizable just now, one of the American missionaries, resident in Lahore, might be requested to allow the students to live in his Compound, and to take a friendly and Christian interest in them, till a medical missionary arrives from home to assume the whole superintendence.

‘With reference to the extent of medical education which our students should receive, I am of opinion that we should qualify them for becoming practitioners, equal in attainments, at least, to the Government Sub-Assistant Surgeons.

‘That we may get and retain the very best of the young men belonging to the respective missions of the Punjab, it is necessary, we think, to hold out to them adequate inducements as to status and salary. Unless we do so, we are likely to get inferior men, and, it is probable, the whole scheme may thereby prove a failure. It is to be hoped, however, that the Punjab Medical Missionary Society, especially, will look to this point.

‘I am very happy to be able to inform this meet-

ing, that already some progress has been made in collecting funds to defray the necessary expenses of this scheme in its embryo beginnings. Dr. Henderson, one of the Professors of the Lahore Medical College, undertook, at the commencement of last hot season, to collect as much money as would be sufficient for three scholarships of twelve rupees each a month, for one year. I have little doubt that, if suitable young men come forward, we shall soon find ourselves in the possession of funds, amply sufficient, to defray the increased expenditure. From the little I know of the Punjab, I feel fully convinced, that our fellow-countrymen only require to have a really needful and feasible scheme presented to them, to elicit their generous liberality.

‘Such, then, is a very brief and rough outline of the scheme I have to propose respecting medical missions in this province. And I trust, if it meet the approval of those now present, we shall soon see at Lahore, a little band of Christian young men, preparing themselves for this comparatively new and important sphere of Christian usefulness.’

The subject thus so fully brought before the Conference and the Punjab Medical Missionary Society by Dr. Elmslie, was carefully and prayerfully considered at both meetings; and the result of their deliberations is given in the following communication addressed by the Secretary of the Punjab

Medical Mission to the Edinburgh Medical Missionary Society :—

‘LAHORE, 28th *Januáry* 1867.

‘MY DEAR SIR,—I have much pleasure in forwarding, herewith, copy of Resolutions passed at last meeting of the Punjab Medical Missionary Society, relative to the training of a number of native Christian converts, in all the branches of Medicine and Surgery, with the view of their being employed in medical missionary work.

‘It is not necessary that I should enter into an explanation of the scheme, as the paper read on the subject, before the committee, by Dr. Elmslie has already been forwarded to you.

‘The members of committee were all agreed as to the desirability of carrying the scheme into effect, with as little delay as possible, inasmuch as we cannot expect to obtain a supply of European medical missionaries sufficient to occupy the field which, under Providence, seems to be opened up for such an agency.

‘From various parts of the Punjab, this Society has had applications for the services of medical missionaries. There are many districts, especially along the frontier, and in the hills, where the skill of a European practitioner, or of a native trained under European supervision, is not available by the inhabitants. In such places, the influence of medical missionaries would rapidly extend itself.

‘Among rude and semi-civilized tribes, no agency

is so potent, for the removal of bigotry and prejudice, as the healing art. Through its instrumentality, a patient hearing will often be obtained for the Gospel, when other means would be of no avail. In the Kashmir Medical Mission, we have witnessed the happy results of this combination. When an ordinary missionary attempted to proclaim the glad tidings of salvation, in the beautiful valley of Kashmir, the ignorance and bigotry of the inhabitants, and the hostility of the native Government, were up in arms, and he was obliged to desist. Dr. Elmslie has now, for two seasons, been carrying on medical missionary operations in Kashmir, and has had thousands of applicants for medical aid, all of whom, while they have had their bodily ailments treated, have also had a word in season spoken to them.

‘In practically carrying out the proposed scheme of training, as medical missionaries, a number of native converts, considerable expenditure will be incurred. Each of the native students will have to undergo a course of training, extending over five years; and it is calculated that a scholarship of £14 a year (or £70 for the five years) will be necessary for the support of each. I think that this Society will be able to raise funds sufficient to establish a few scholarships, but not sufficient to enable us to get out and support a European medical missionary, to exercise a supervision and control over the native students, during their course of professional training.

‘As all the members of committee are of opinion that such supervision is essential to the scheme, we earnestly beg that the Edinburgh Society will lend us a helping hand, and send out and support an agent to be stationed at Lahore, whose chief duty it would be to exercise a general supervision over the native Christian students, during their course of medical training at the Lahore Medical College.

‘In the large city of Lahore, there would be ample scope for direct medical missionary work. In the event of your sending out a medical missionary, he might enter upon this at once, by opening a dispensary in the city. He would thus also be enabled to supplement the training which the students would receive in the classes of the Lahore Medical College, by giving practical instruction at the bedside, and by impressing on their minds, through the force of example, the duties and responsibilities that would, in after life, devolve upon them.

‘I shall feel very much obliged by your laying the scheme before the Committee of the Edinburgh Medical Missionary Society, and I trust that a favourable answer will be sent.—Yours, etc.,

‘R. GRAY, M.B.,

*‘Supt. Central Prison, Lahore, Joint-Secy. to  
the Punjab Medical Missionary Society.’*

*‘Resolutions passed at a meeting of the Committee of the Punjab Medical Missionary Society, held at Lahore on the 30th November 1866.*

‘1. That the Committee record its cordial approval of the scheme brought forward by Dr. Elmslie, of giving a complete medical training to a number of native Christian converts, with the view of their being employed in medical mission work.

‘2. That the Committee use its best endeavours to interest the members and friends of the Punjab Medical Mission on the subject, and to secure the establishment of a number of scholarships, in addition to those already promised.

‘3. That a circular be addressed to the missionaries in all the stations in the Punjab, requesting that they will kindly communicate with the secretary of this Society, in the event of their being able to recommend any of their converts as medical missionary students.

‘4. And that a communication be sent to the Edinburgh Medical Missionary Society, explaining the scheme brought forward by Dr. Elmslie, and begging that the Society will send out and support, with such aid as this Society can give, a pious and skilful medical missionary.’

The following memorandum on the same subject is worthy of preservation. It was written by Sir Donald F. M’Leod, in whose sudden death the cause



of Christian missions has lately lost a warm friend and advocate. He was one of those Indian statesmen, of whom, we rejoice to think, there have been not a few, whose Christian zeal has been as distinguished as their administrative ability.

*‘Memorandum.*

‘I have carefully read the paper, drawn up by Dr. Elmslie, on the subject of training native Christian youths for the duties of medical missionaries ; which paper was recently read by him at a Conference of the Church Missionary Society, held at Umritsur, as well as before a meeting of the Punjab Medical Missionary Society.

‘I have long been convinced, that medical missions are eminently suitable and appropriate in the present circumstances of India, and calculated, accordingly, to prove of the very greatest value and importance here ; and as I have, on many occasions, recorded my opinion to this effect, I need not enlarge on it in this place.

‘Holding, then, this opinion, I highly approve of Dr. Elmslie’s proposal, which I think likely, if carried out, to enable us to extend medical missions much more rapidly and widely than we can hope to do in any other way, at the same time that it adds another most important and appropriate mode of employing and providing support for our native Christians, to the very few which have, as yet, suggested themselves ; thus helping largely towards



the solution of one of the most difficult problems we have to solve, in respect to the heterogeneous bodies of native Christians assembled, under the existing system, at our mission stations.

‘A similar project has, I believe, been proposed for the N.W. Provinces; and some are of opinion, that, if the scheme should be tried and succeed at Agra, this should suffice for all our wants; that Agra has superior advantages to Lahore, and that it will be well, at all events, to defer action at Lahore, until the scheme has been first tried at Agra. But apart from the fact that the youths of the Punjab would be entire strangers at Agra, and would find the people of that part of India, in a great measure, foreigners to them, Lahore possesses a great advantage in this, that the Lahore Medical College educates up to the standard of Sub-Assistant Surgeons, which the College at Agra does not profess to do; and I entirely agree with Dr. Elmslie in considering this to be a very essential point.

‘Lahore is, in fact, the only place in this Presidency, out of Calcutta, where medical students are trained to the above standard. The Punjab contains a large number of missions of different Societies. A large part of its population, if not the whole, differ greatly from those of the N.W. Provinces and Bengal. Lahore possesses a mission which has been eminently successful in educational efforts. It is a place in which a medical missionary might be employed with great effect, humanly speaking;

and the body to which this mission belongs, has a medical missionary in connection with it, though at present not labouring at Lahore. The Medical College at Lahore is, happily, entirely free from the taint of virulent religious scepticism which has infected but too many sister institutions, insomuch that the Sub-Assistant Surgeon attached to it, though a Mohammedan, is believed to be so favourably disposed towards Christianity, that it was at one time reported he was a candidate for baptism. So that, on all accounts, I consider Lahore to be well worthy of selection, for one of the first experiments that may be made in connection with this scheme.

‘It is, no doubt, very indispensable that the greatest care be taken to send no youths to be trained as medical missionaries who do not afford satisfactory evidence of being truly spiritually-minded; and this will, it is to be feared, be always attended with difficulty. But not more so here than elsewhere; and as no new machinery has to be created for the purpose, no expense will be incurred until suitable candidates appear, while all who do appear will be at once admitted to all the advantages contemplated by the scheme, whether the number of such candidates be great or small.

(Signed) ‘D. F. M‘LEOD.

‘7th February 1867.’

Circumstances prevented Dr. Elmslie’s carrying into practical operation the scheme he had proposed,

for training a native medical missionary agency for the Punjab. Had he been spared to see the medical mission permanently established in Kashmir, we have no doubt he would then have turned his attention to this most important enterprise. The development and practical working out of the scheme, therefore, is a work which we sincerely trust Dr. Elmslie's successor will undertake, and be permitted to accomplish. The importance of such an institution for training native medical evangelists for India can hardly be overestimated.

In connection with the Edinburgh Medical Missionary Society's Mission at Madras, a training institution, similar to that proposed by Dr. Elmslie for the Punjab, was originated and carried on for some years by the late lamented David Paterson, F.R.C.S., and is now in charge of Mr. Elder, L.R.C.S., the Society's agent at Madras. In Travancore a goodly band of native Christian youths were trained by the writer, and are now labouring there, as medical evangelists in charge of branch medical mission dispensaries established throughout the Province. In Bombay, Rajpootana, Madura, and Ceylon, similar efforts have been successfully made; and, wherever a medical mission has been localized, the training of intelligent native Christian youths, to fit them for labouring among their fellow-countrymen as medical evangelists, is deemed one of the most urgent and indispensable departments of the work of the medical missionary.

It would, however, be a great advantage, if central medical missionary training institutions, such as the one at Madras, were established and liberally supported in Calcutta, Lahore, and Bombay, where a regular course of systematic and practical teaching could be imparted, in connection with the flourishing medical schools and large hospitals existing in those cities. The Christian philanthropist could hardly engage in a more hopeful and blessed work on behalf of India, than in the practical development of the scheme proposed by Dr. Elmslie for training a native agency for this department of missionary work.



## VII.

### Work and Prospects in Chumba.

‘Kings shall fall down before Him,  
And gold and incense bring ;  
All nations shall adore Him,  
His praise all people sing ;  
For He shall have dominion  
O’er river, sea, and shore,  
Far as the eagle’s pinion  
Or dove’s light wing can soar.

For Him shall prayer unceasing,  
And daily vows ascend ;  
His kingdom still increasing,—  
A kingdom without end.  
The mountain dews shall nourish  
A seed in weakness sown,  
Whose fruit shall spread and flourish,  
And shake like Lebanon.’





## CHAPTER VII.

### WORK AND PROSPECTS IN CHUMBA.

SHORTLY after his return to Umritsur, having spent a second summer in Kashmir, Dr. Elmslie proceeded to Chumba, at the request of the Punjab Medical Missionary Society, with the view of making arrangements for the establishment of a permanent medical mission there. In the following letter, addressed to the Secretary of the Edinburgh Medical Missionary Society, Dr. Elmslie shows the importance of the position he was called to occupy in Chumba, and how in God's providence the opening occurred:—

‘For some time past, the native prince who rules over the beautiful valley of Chumba, has been very favourably disposed towards Christianity. The Rev. W. Ferguson, previously chaplain to a Scotch regiment, gave up the rank and emoluments accruing from that appointment, to become a humble missionary. He had his attention directed to the valley of Chumba, doubtless by the Spirit of God, and there he has been labouring for the past three or four years. God has blessed him with great

success. The Rajah has shown him much favour, and has allowed him great freedom of speech and operation. Chumba is a Himalayan valley of great beauty. The climate, I am told by everybody who knows anything about the valley, is most delightful and salubrious; and the people, who are almost exclusively agricultural, are simple, affable, and very accessible. It is said by every one who is acquainted with the valley and its inhabitants, that, with the blessing of God, a medical mission will be sure to prove most successful in Chumba. The condition of the valley, as to medical skill, is like that of all other states similarly situated in other respects. There is no European doctor in the whole valley. This is in favour of the medical mission.

‘I do not know if you have heard, through the Church Mission, the events which have led to the present effort to establish a medical mission in Chumba. Some two or three months ago, the favourite Ranee, or wife of the Rajah, was safely delivered of a daughter. For some time she went on well, but, by and by, she became seriously ill, and at last died. Great blame was attached to the native Hakim who was in attendance. From that time to this, His Highness the Rajah has been very anxious to have the services of a European physician for his family. With this in view, he applied to Government; but, as the Government at present have the greatest difficulty in supplying their own necessities, they replied, that they were unable to

accede to the Rajah's request to send a European doctor to Chumba. The Rajah had his attention directed to the fact, that a Society for the establishment of medical missions existed in the Punjab, and that, perhaps, he might be able to secure the services of a physician through that Society. An application was made accordingly, the Rajah offering £20 a month, a free house, a dispensary, an hospital, all the current expenses connected therewith, to the Punjab Medical Missionary Society, if they would provide a man for Chumba. From all that I can learn about the new sphere, it appears to be a most inviting one. If you have a man at your command, I think you may safely send him there, with the certainty, so far as we can see, of his being greatly blessed, both as a doctor and as a missionary.

‘The Punjab Medical Missionary Society, considering the opening a very important one, have decided on my spending the winter months in Chumba, to keep the door open, and to initiate the work. If you are able to send out a medical missionary in the course of the cold season, I shall, if spared, be able to give him some information about the valley, the Rajah, and the inhabitants, on his arrival amongst us. The sort of man the Society here would like, is a really Christian man, and a good Surgeon.’

The next paragraph is from a letter, addressed to the Rev. G. D. Cullen, Edinburgh, who was a kind

friend to Dr. Elmslie while a student, and took a deep interest in his subsequent missionary career. The letter is dated Umritsur, December 3, 1866:—

‘I leave Umritsur this evening for Chumba, of which, doubtless, you have by this time heard. We had a meeting of the Punjab Medical Mission Committee last week in Lahore, and also a Missionary Conference at Umritsur; and, amongst many other important matters that were discussed, it was agreed to write home direct to the Edinburgh Medical Missionary Society, and beg of them to send out a medical missionary to carry on the work in Chumba. Doubtless the application will reach you by this mail. You will be happy to hear that an ever-growing interest is being taken in medical missions in the Punjab.’

The next extract is from a letter to Dr. Cleghorn, written after his arrival in Chumba, and dated 5th January 1867:—

‘I am now here initiating the Chumba Medical Mission. The dispensary is open, and patients are treated *daily*. Medical mission dispensaries *should* be open daily. Some are not, and I am greatly astonished at this. I fear practice amongst Europeans has something to do with this. We medical missionaries need constantly to remember, that we did not leave home to be doctors to our own countrymen, who can, in most cases, be attended by other medical men; but we left home to

labour amongst the heathen, that, by the blessing of God on our medical labours, we may lead these same perishing heathen to the truth as it is in Jesus. The Rajah is very friendly, and the people are gradually taking advantage of the dispensary. I do hope and pray that the parent Society in Edinburgh may be able to find a man for this promising field.'

'*February 8.*—To-day I sketched a plan for a dispensary and small hospital. Within the last four weeks, we have had four cases of lithotomy, one of which is now well, and has left for his home; the other three are progressing favourably. Goitre is met with by the hundreds. The biniodide of mercury rubbed in locally, and exhibited internally in the form of pill at the same time, works wonders. This medicine is far more effectual than iodine alone.'

Dr. Elmslie's labours in Chumba were very highly appreciated. Shortly after he had commenced work there, Mr. Ferguson, the founder of the mission, with whom, during his stay in Chumba, Dr. Elmslie was associated, wrote as follows regarding the medical mission:—

'I mentioned, in a former letter, our prospects of having a medical missionary settled here in connection with our mission. I rejoice to be able to tell you now that our hopes have been realized. Dr. Elmslie, the able doctor and devoted mis-

sionary of Kashmir, has been kindly lent us by the Church Missionary Society till April next. When the season comes round for him to resume work in the neighbouring valley, Kashmir, we expect to have a successor to him in Chumba, on the spot, and ready to take his place. The Punjab Medical Missionary Society, a thoroughly unsectarian body, under whose auspices we invited a medical missionary to Chumba, has requested the Edinburgh Medical Missionary Society to look out for a man of the right stamp.

‘The Rajah of Chumba has agreed to contribute to the funds of the Medical Missionary Society £240 annually,—to give a free house to the missionary, a complete supply of medicines and surgical instruments, with a staff of dispensary and hospital assistants and servants.

‘For all this, the missionary will give all needed medical attendance to the Rajah’s household and court; but, excepting this, the missionary is, in no sense, the servant of the Chumba State. All his dispensary and hospital work is, as it should be, an entirely voluntary thing; so that the missionary part of the work, which the Rajah not only freely allows, but, in fact, seems really to feel interested in, is in no way interfered with. The people, who receive the medicine for the body, and listen to the word of life, which is able to save the soul, feel that they are indebted to one and the same source for both.

‘Dr. Elmslie arrived here twelve days ago, and

was warmly received by His Highness the Rajah, by the British officer who superintends the Chumba State, and, I need scarcely add, very cordially by the members of the mission. He has been at work for a week, and has already got a goodly number of patients, who give an attentive hearing, every morning, to the message of redeeming love. Confidence in the medical aid afforded is rapidly growing, and I expect to see, before long, a very large concourse of patients of all classes.

‘There cannot be a doubt, that the coupling of the healing art with the message of salvation, is a right and most promising method of procedure. A single morning’s attendance at Dr. Elmslie’s dispensary, gives one a striking illustration of the importance of attending, in missionary enterprises, to our Lord’s instructions to His disciples, “Heal the sick, and say unto them, The kingdom of God is come nigh unto you.”

‘It can be easily imagined how valuable an addition the Doctor is, both in his medical and missionary capacities, to our missionary staff. He already numbers, among his patients, three of our native Church, and several mission servants.’

The following letter, addressed to Mr. Bell, dated 18th March 1867, gives interesting details of his sojourn in Chumba, and his experience of the country and people :—

‘In another fortnight, God willing, I shall leave



Chumba, *en route* for Kashmir. All parties concerned are extremely sorry that, up to the time that we last heard from Edinburgh, no medical missionary had been found for Chumba. His Highness the Rajah, especially, is sorry, and requested me yesterday, when I went to see him, to write to you again, and beg of you to do all you can to send a *Christian* doctor here. I have to repeat what I said before, respecting this valley as a field for medical missionary operations. During the past four months, during which I have resided in Chumba, I have enjoyed most excellent health. Indeed, all my life long, I have never been so well. From what I have seen of the diseases of the people, I am decidedly of opinion, that the climate is most salubrious, and most likely to suit the European constitution. In the case of those who are greatly exposed, I have met with a number of cases of intermittent fever, and, what is remarkable, a good many of these cases were Quartan. Goitre is extremely common in the valley. Men seem as frequently affected as women. It is very rare to meet either a man or a woman who has not goitre. The youngest patient I have seen with goitre was a child of three years of age. A European lady, who came to the valley two years ago, has acquired a large goitre. I have not met with a single case of cretinism since I entered the valley. Perhaps cretinism has nothing to do with goitre. I have performed the operation of lithotomy nine times since my arrival. No death has

occurred. Two cases of union by the first intention have taken place. Both patients were sixty years of age. Leprosy is another common disease in Chumba. We have had a considerable number of cases. The disease usually makes its appearance first in the hands or feet. The skin becomes, first of all, insensitive, then ulcerates, and, by and by, joints or whole toes and fingers ulcerate and fall off. Skin diseases do not appear to be very common. Scabies is chief.

‘From what I have seen of the people and of the valley, I am of opinion, that no more delightful sphere of labour could be found, were one to search for it from the Himalayas to Cape Comorin. The valley is salubrious; the scenery is beautiful and grand beyond description; the people are simple, accessible, and most willing to listen to the Christian missionary; and the Rajah is deeply interested in the missionary’s labours, and lends him substantial aid. Things are very hopeful at present in this field of labour. The people seem to be on the eve of embracing Christianity in large numbers; much prayer is being offered up on behalf of Chumba, and there are signs of a blessing being near at hand.

‘I am much interested in a Brahmin, who has been attending the dispensary for the past month. He is most attentive, and manifests great interest in what he hears about salvation through the blood of Jesus. He attends, of his own accord, the devotional exercises held for the whole Mission. He is

now never absent, and, what is very satisfactory, he appears to be growing in accurate knowledge and appreciation of the cardinal doctrines of Christianity. We hope he may soon voluntarily ask for baptism. The Spirit is needed.

‘We have just lost a great friend to medical missions in the Punjab. Colonel Lake, Financial Commissioner of the Country of the Five Rivers, has just left India for England. Ever since medical missions were started in the Punjab, Colonel Lake has taken a most warm interest in them. Indeed, he has been Chairman of the Punjab Medical Missionary Society since my arrival in the country.’

An earnest appeal for a medical missionary for Chumba, was forwarded by the Punjab Medical Missionary Society to the Edinburgh Society, and along with it, an administrative order, signed by the Rajah of Chumba, which must be regarded as a very remarkable document, coming, as it does, from a heathen prince. It is as follows:—

‘Administrative order by His Highness Sirree-Singh, Rajah of Chumba, made at Chumba on the 20th day of Magh, s. 42 of Chumba era, corresponding with the 31st of January 1867 :

‘Whereas the Punjab Medical Missionary Society have expressed their readiness, in reply to certain offers from me, to station at Chumba a medical missionary: I hereby agree that, in the event of their doing so, I will abide by the following condi-

tions, for a period of seven years from that date ; and in the event of my decease before that time, they shall also be binding on my heirs and successors.

‘ I. I will pay an annual subsidy of 2400 rs. (two thousand four hundred rupees) to the said Society.

‘ II. I will provide, for their use here, a suitable house and out-offices, and a suitable building and out-offices for use as their hospital and dispensary, and will not make any charge on account of rent for such buildings.

‘ III. I will provide all medicines, surgical instruments, and surgical and medical appliances, which the Society may consider necessary ; and bear the expense of all contingent charges connected with the dispensary, the salaries of the native attendants of the hospital and dispensary included.

‘ IV. The Society’s bills, under the first and second conditions, will be paid by me, in such way and to such persons as they may desire.

‘ V. The Chumba Medical Missionary shall have full liberty to prosecute the calling of a Christian missionary, in the same way as he would be allowed to do, were he employed in any of the Provinces of India which are under the immediate administration of the British Government.

‘ VI. The medical missionary shall be bound, on my demand, to render to me, and to my immediate relatives, due professional attendance ; but beyond this, I will not interfere as to the way in which he may see fit to carry on his medical duties in Chumba.

‘VII. I wish the Society to avoid, as far as possible, changing, during the above-mentioned period of seven years, the medical missionary whom they may appoint at Chumba, but I will not object to such changes as the Society may certify as unavoidable, and not made only for the furtherance of missionary interests in other parts of India.

‘VIII. I will pay to the Society, the charges to which they may be put, for the passage out to India of the medical missionary they appoint, and also for his return to Great Britain at the expiration of seven years from this date. My proceedings on the subject, of the 11th and 12th October 1866, are hereby cancelled.

‘These arrangements, for the introduction of the practice of European surgery and medicine into my state, were set on foot at my own special desire. They have been carried out with the aid of my Superintendent; and, in all future proceedings connected with them, my Superintendent will be consulted before action is taken.

‘Executed at Chumba, this 20th day of Magh,  
Chumbat year 42,—equal to the 31st day of  
January 1867.

(Signed, in vernacular)

‘RAJAH OF CHUMBA.

‘E. G. WACE,

‘*Officiating Superintend., Chumba.*

‘True copy.

‘A. M. DALLAS,

‘*Secy. Punjab Med. Missy. Society.*’

The Directors of the Edinburgh Medical Missionary Society were successful in their efforts to secure a medical missionary for Chumba. But God's ways are often very mysterious. When everything seemed propitious,—the way opened, means provided, a suitable man secured, and all the preliminary arrangements satisfactorily settled,—the hopes of Dr. Elmslie and his friends were disappointed, and a Medical Mission for Chumba, for the time at least, had to be abandoned.

In a letter addressed to Mr. Bell, dated Srinagar, Kashmir, 1st October 1867, Dr. Elmslie writes:—

‘I duly received your letter of the 9th July, telling me that you had, at last, found a man willing to go, and suitable for Chumba. Long before this reaches you, you will have heard that the door, which appeared to be wide open in that State, has been suddenly and most unexpectedly closed. Doubtless my joint-secretary, Dr. Dallas, has informed you of the circumstances which led to this deplorable event, so that it is not necessary for me to say much on the subject.

‘Shortly after the Administrative Order (a copy of which you received) was drawn up at the Rajah's request, by the then Resident, who was personally most favourable to the projected mission, another Resident was appointed to the superintendence of the State of Chumba. Unforeseen difficulties arose in arranging the details for the practical working of



the proposed mission, and the scheme had to be abandoned, at least for the present. It is deeply to be regretted that those difficulties should have arisen; but we believe that this trial of our faith is of the Lord's sending, and meant by Him, in His infinite wisdom, to be for the future good of His cause in Chumba. If so, we can well afford to wait patiently on the Lord.'

The circumstances of the Chumba Mission, carried on, hitherto so successfully, single-handed by Mr. Ferguson and his staff of native helpers, are now such, that the way may again 'soon be open for the establishment of a medical mission there. The Rajah who proposed such liberal terms in 1867, is since dead. Who can tell, but that the Lord, by whom kings rule, may incline the heart of his successor to offer similar inducements, in order to secure for himself and his people the services of a medical missionary?

Towards the end of March, Dr. Elmslie left Chumba, and after a pleasant journey, reached Umritsur early in April, and at once commenced preparations for his departure to Kashmir.



## VIII.

### Third Year's Labours.

'In the thick of the ancient battle,  
Where the strong bear down the weak,  
With the flaming sword of living words,  
He fought for the poor and meek.

Where'er were wrongs to be righted,  
Or sick to be soothed and upheld,  
Or a generous deed lay hidden,  
Or a generous purpose quell'd,

Or a noble heart lay sinking  
For the want of a cheering word,—  
The music of his earnest voice  
Above the din was heard.'

*The Three Wakings.*



## CHAPTER VIII.

### THIRD YEAR'S LABOURS.

THE time had again come round for Dr. Elmslie's return to Kashmir. As usual, on his journey from Umritsur to Srinagar, he held receptions for the sick at each halting-place along the line of march. No fewer than 263 persons received medicine and advice for their bodily ailments on these occasions, and, what is better, had the Gospel proclaimed to them by our devoted friend, who, in sowing the precious seed beside all waters, never lost sight of the promise, which strengthens the hand and encourages the heart of the faithful labourer: 'As the rain cometh down, and the snow from heaven, and returneth not thither, but watereth the earth, and maketh it bring forth and bud, that it may give seed to the sower and bread to the eater; so shall my word be that goeth forth out of my mouth: it shall not return unto me void; but it shall accomplish that which I please, and it shall prosper in the thing, whereto I sent it.'

At those receptions, the religious services did not appear to be distasteful, either to the sick or their

friends ; on the contrary, the people took an interest in them, and some of the listeners seemed to relish them. Conversations and discussions on the subject of religion were repeatedly held; religious books were distributed among those who, on trial, were found able to read. Several persons, who had formerly received medical aid and religious books from the mission, came to show themselves, and express their gratitude. One of these was the Nawab of the extensive district of Uri, who had, two seasons before, been cured of a long-continued and painful disease.

In the following letters from Dr. Elmslie, written from time to time, during his sojourn in the valley, we get interesting details regarding the nature and progress of his work ; and likewise, as indeed in all his communications from first to last, we have beautifully portrayed the sincerity of his friendship, his simple, childlike faith in God, his zeal for the Master's glory, and his hopefulness in the midst of many discouragements.

The following, addressed to Mrs. Cleghorn, is dated Srinagar, Kashmir, 9th July 1867 :—

‘I need scarcely tell you that your letter of the 28th February and 6th April was very welcome and very encouraging. It grieved me much, however, to learn that sickness, personal sickness, was the cause of the gap between the commencement and the end of your cheering letter. I hope that

God has been pleased to bless the means employed for your restoration, and that you are now yourself again, and that you are looking forward, with healthful joy, to your approaching meeting with your dear husband. I do, indeed, regret very much I have not been privileged to meet Dr. Cleghorn since his return to India. I have written to him once or twice; but letters are a poor substitute for sight, as you must well know. I had much to speak to him about, respecting this branch of the Lord's work, in which he, you, and I are all so much interested. But we must wait till God, in His all-wise and good providence, presents us with an opportunity of meeting together, and talking about His work, and our plans and views regarding it.

‘For some reasons, I am very sorry that India is about to lose Dr. Cleghorn; but I feel sure that, as long as he lives, it will lose only his bodily presence. Mentally and spiritually, he will still be much in India. I greatly rejoice at the prospect of his taking his seat at the Board of the Edinburgh Medical Missionary Society; and, from his intimate acquaintance with India and her countless wants, in a missionary point of view, he will be able to advise and stimulate the Society to do a great deal more than it has, up to the present time, done for this extensive British Province, which, unquestionably, has such pressing claims upon the churches of Great Britain.

‘Medical missions in the Punjab are daily attract-

ing more notice and consideration, and are, more and more, being recognised as a most powerful auxiliary in the spread of the glorious Gospel of the grace of God, and, I believe, this may with truth be predicated of other parts of the earth.

‘I must tell you a few facts about the Punjab, to corroborate what I have said. Several of the leading men in this rapidly advancing Province, have already written, or are about to write, to the Edinburgh Medical Missionary Society, to ask them to select and send out immediately, a medical missionary for a most delightful station, called Palampore; situated in the valley of Kangra. In all probability, you know the spot. It is a place of great importance, and lies in one of the routes into Central Asia. Oh! to be able to cross those towering mountains, and to scatter broadcast the precious seeds of the everlasting Gospel!

‘Then I must tell you about a Mr. W., an American missionary, who is now sojourning in Kashmir for his health. He is so impressed with the suitability of medical missions to the wants of India, that he has written home to his son in America, urging him, by all means, to study medicine with the view of coming to India, to labour in Christ’s service as a medical missionary.

‘I have another similar case to tell you of. The Rev. A. B. came out to labour, last year, as a missionary in Kashmir. He has seen a good deal of my work since his arrival in the fair valley; and

he has been so favourably impressed with medical mission work, and so convinced of its being the best way of introducing the Gospel into a country like Kashmir, that he has, after much deliberation and prayer, formed the resolution of going to Edinburgh, to prosecute medical studies, with a view of taking, at least, a *degré* in surgery, and, after that, if it please God, of returning to these remote but beautiful regions, to preach and to heal. You will be sure to meet Mr. and Mrs. B. during their stay in Scotland. I shall take the liberty of giving him a note of introduction to Dr. Cleghorn, and I feel sure he will assist Mr. B. with his advice whenever he needs it.

‘You wish to know my views of the work which is being carried on in Chumba. So far as I could see, the work is genuine, and is of God. The native Christians are extremely simple. During my stay in Chumba, they made progress in the knowledge of divine things. There are many of the inhabitants of the valley who have almost given up idolatry, and embraced Christianity; but some heathenish notions and prejudices still cleave to them, which prevent their being really worthy of the sacred name of Christian. But you will have seen, in Mr. Ferguson’s report, a full account of those errors. The people of Chumba are always very ready to listen to the preaching of the Gospel, and appear to be less bigoted than many whom I have met in my travels. The Rajah I consider a very hopeful



character. You will be delighted to learn that he has just proclaimed complete religious toleration throughout his territories. Christians have now the same rights and privileges as Hindus and Mussulmans in Chumba. Some time ago, I had a very nice letter from His Highness on the subject. Mr. Ferguson has just engaged the services of a Christian schoolmaster. This I regard as a wise step. Before I left Chumba, I had the great pleasure of seeing the first Brahmin baptized in Chumba. He is a young lad, of some twenty-two or twenty-three years of age, and has good parts. There was a great commotion in the city when this took place. When I left, Mr. Ferguson and I were in hopes that another Brahmin, who had been a patient of mine, would come forward and declare himself a Christian. Up to the present time, however, I have not heard that he has done so. He was in a very hopeful state when I left. I do greatly long to hear of his being drawn to Christ; for, as you truly and beautifully say, however thankful we ought to be for other kinds of fruit from our labours, it is *soul* fruit that we desire.

‘ The present season in Kashmir has been a most eventful one to the medical mission. It appears that the local Government and the Mussulman Mullahs are now greatly afraid of us, especially as two of their priests have become Christians. The result of this fear and hatred has been great hostility and opposition to my work. From the very

beginning of the season, sepoy's were placed at the entrances of all the avenues leading from the city to the European quarters. These sentries confessed themselves, that their orders were to stop the sick from going to the Padre Doctor Sahib, as they style me. Some were allowed to pass on, giving the sepoy's some money; others who were caught coming to me were roughly handled and beaten, some were fined, and others were imprisoned. The fact that the local Government of Kashmir were thus forcibly preventing the poor, helpless sick of the city of Srinagar, and of the valley generally, from frequenting the Medical Mission Dispensary, became known to the Supreme Government of India, and they sent a request to the Government of the Punjab to investigate the matter. The British Resident, who is a Christian man, showed me the request, and asked me to state my experience and opinion. This I did, and my report was sent up to the Punjab Government, who are convinced of the fact, and strongly urge the Supreme Government to adopt measures to put a stop to such cruel, bigoted, and tyrannical proceedings on the part of the Native Government of Kashmir. I am hopeful that all this is of the Lord's doing, and that there are brighter and happier days about to dawn on this lovely but ill-fated valley. I earnestly beseech you to pray for Kashmir, and get all your Christian friends to do the same.

‘Just as the hostility and opposition of the local

Government of Kashmir had reached a climax, cholera broke out amongst His Highness's troops. It appears that some sepoy, who had got leave to go and wash in the Ganges at Hardwar, had returned to their regiment at Srinagar, and brought the seeds of cholera with them. At any rate, those sepoy, had scarcely arrived, when that awful pestilence broke out, and began to carry off many. Everything was done to prevent the spread of the disease, but it at last invaded the city; and the British Resident deemed it necessary, for the safety of the European visitors, to institute a *cordon sanitaire* round the European quarters. As my dispensary is situated there, I was compelled to put a stop to my work for a time. When it was intimated to the suffering sick, that they were not to return to the dispensary until they should receive intimation to do so, the scene can be more easily fancied than described. It would have melted a heart of stone. Since then, I have visited the city almost daily, and done what I could to alleviate the sufferings of the miserable inhabitants, many of whom are daily carried off with cholera. More than a fortnight ago, I sent a most polite letter, in Persian, to the Dewan, or native Viceroy, expressing my sorrow at the heavy calamity that had fallen on his people, and offering him my professional advice, and personal assistance, in this trying emergency. He promised to reply to my letter the day following its receipt, but, up to the present time, I have not

heard from him. This is cruelty, bigotry, and tyranny with a vengeance. The poor people of the city are sadly neglected, even by those who ought to take some care of them. I have a presentiment that the Lord is at work amongst us, and will certainly glorify Himself by these calamitous events, and bring good out of them, to His own great and glorious cause.

‘I cannot tell how glad I am, amidst all this hostility, opposition, sickness, and death, at the near prospect which I have of seeing other two Kashmiris baptized, and admitted into the visible Church. They are both men of some parts, and have been studying Christianity for some time past. Mr. Brinckman and I, on Sabbath last, gave them a very sifting examination on the great essential doctrines of our blessed religion. They answered very satisfactorily, and, on the rite of baptism being explained to them, they expressed a desire to be forthwith baptized. It is likely, therefore, that these two men will be added to the number of this infant Church. This is great matter of rejoicing and thankfulness. Surely the Lord has a people even in Kashmir.

‘You have right views about missionaries and mission work. Their work is the Church’s work. Their work is every Christian’s work, and, therefore, every Christian ought to be interested and prayerful in regard to it.

‘By the bye, I began a work this season amongst

the beggars and incurably blind and lame. Formerly, they used to receive alms at all times and seasons; but, at the beginning of this season, I had them all assembled in my tent, the Gospel was preached to them, and then I gave them something each. The Lord may bless this to some of them. The Chaplain, who is very friendly, collected some money among the visitors, to help me. Can you do anything for these needy ones? If you can, the Lord will reward you. The work to be done here is inconceivable. Everything is wrong. The devil has it all his own way,—not all, blessed be God. But I must close.' . . .

The following letter to Mrs. Lake was written a few days after the foregoing :—

. . . 'I am delighted to hear the good news, that you feel yourself so much better for the change to England, and that you feel so happy in visiting those dear to you. Believe me, this is far better than the most skilful physician's nauseous draughts. Your happy feelings are a sure and certain proof of your improved bodily health. The medicine for the mind is often the best for the body, and frequently the best way of improving the body is to act upon it through the mind. I have often thought that many a life might have been saved, humanly speaking, if the physician had just introduced into his treatment a spiritual element to soothe the restless soul of his patient. The diseases of the soul, and their

effects upon the frail body, are very often forgotten by physicians. I think the remedies, therefore, of such soul-physicians as Archdeacon Davies, are frequently the very best that can be administered for the restoration of bodily health.

‘This has been a most eventful season to the Kashmir Medical Mission. From the time I opened my dispensary, the opposition and hostility of the local Government have been most determined and bitter. I am happy to say the matter has been brought under the notice of the Government of the Punjab, and of the Supreme Government also, and this, without any special effort on the part of the Committee to do so. Indeed, many of the Committee are still ignorant of the fact. It appears that, some time ago, the attention of the Supreme Government had been directed to a notice which appeared in a native newspaper, to the effect, that the sick of Kashmir were being forcibly prevented from going to the mission dispensary. On learning this, the Supreme Government sent a request to the Government of the Punjab to investigate the matter and report upon it. After I had carried on my operations for some time, Major Cracroft, who is British Resident here this season, showed me the official papers relating to the matter in question, and requested me to state my experience and opinion. This I did at some length, giving appropriate extracts from my journals, and other proofs, which put it beyond a doubt, that the



local Government have been using most violent measures to prevent and deter the sick from coming to the dispensary for advice and medicine. Major Cracroft, having made a few comments on my report, sent the whole up to the Government of the Punjab, for their information. I am now waiting, patiently and prayerfully, for the results of all this. Something certainly ought to be done by our Government, but, I readily confess to you, I fear for the result.

‘In spite of the sepoys, about two hundred and fifty sick have found their way to me. This number, however, is only about one-sixth of what ought to have attended, when compared with the numbers of last season.

‘Just when this opposition and hostility on the part of the native authorities was at its acme, the cholera broke out among the troops of His Highness who were stationed at Srinagar. From the troops, the pestilence, by degrees, spread into the city, and now scores are being carried off daily by it. To protect the European visitors, the Resident established a *cordon sanitaire*; and as my dispensary is situated, of necessity, in the European lines, I had to close it on the establishment of the *cordon*. The Resident and the visitors have left Srinagar for Gulmarg<sup>1</sup> and other places of safety. I am there-

<sup>1</sup> Gulmarg is a beautiful little valley, nestling among the mountains, at an elevation of 3000 feet above the valley of Kashmir. It is a favourite resort of the English visitors during the



fore left alone here, with my dispensary still closed, as the *cordon* has not yet been authoritatively removed. I am not idle, however, as I spend daily several hours in the city amongst the poor people, doing all I can to alleviate their sufferings. This morning, I visited and treated twenty-eight cases of cholera; and while on my way home, I saw the bodies of three men being carried away for cremation and burial. It is awfully solemnizing work. This pestilence may be the Lord's messenger for the punishment of some, and for the after good of the valley. I have had a presentiment, for some time, that God is about to work a change in Kashmir.

'It will delight you and Colonel Lake to learn, that other two Kashmiris have been baptized into the Church of Christ. The baptism took place two days ago, in my bungalow, in the presence of the medical mission servants. The Rev. A Brinckman, of whom you may have heard, performed the ceremony. It was a most affecting scene. One of the men is a Moonshee, while the other is a shawl-maker by trade. They are both men of fair abilities, and may, with God's help and blessing, be greatly serviceable to the mission by and by. As you can easily fancy, I feel very anxious about

months of June and July, to escape the disagreeable heat of the valley. The name is derived from *Gul*, a rose, and *Marg*, a valley or plain among the mountains. This little valley is carpeted with flowers of different varieties.—ELMSLIE'S *Kashmiri Vocabulary*.

them for several reasons. May the Lord keep them.

‘You and Colonel Lake will not, I feel sure, forget poor suffering Kashmir while you are at home. She greatly needs *home* friends.’

A correspondent of the *Southern Cross*, writing from Srinagar during this eventful season, corroborates the testimony of Dr. Elmslie regarding the state of the community, groaning, as it was, under such a load of oppression and tyranny. He says: ‘Fear of their rulers keeps the Kashmiris from inquiring much about Christianity. Fear would not stop them so much after they had believed, but it must deter many from becoming inquirers. A report got abroad in Srinagar, that one of my men had been converted; his name and address were sent off to the Dewan directly. Being a servant of a European, nothing was done to him; but if he had been a common peasant, he would not have escaped so easily. Sentries were posted on the bridges, and on the road leading to Dr. Elmslie’s, to prevent patients coming to him; but the people came round by night, so this plan was given up. A sepoy of the Rajah was coming to undergo a severe operation, which Dr. Elmslie had said *must* be done, else the man would die; but the authorities heard of it, and forbade the man being brought to the good Doctor. He lingered in agony nearly a month, till he got some one to ask the

Rajah's special permission to come, which was granted. The poor man was brought, but too late to be operated upon, with any chance of benefit. He died the same day.'

We can easily imagine what a depressing influence such inhuman conduct must have exercised on the mind of the devoted missionary. His own countrymen had all fled from the neighbourhood of the plague-stricken city. Alone and unaided, he remained at his post, ministering, as best he could, to the wants of the sick and dying. Bitter and cruel opposition met his every effort to alleviate the dreadful sufferings and misery of the people; but, in the midst of all, with that faith which 'is the evidence of things not seen,' he writes: 'Patience; "the Lord God omnipotent reigneth," we fear not the result. "No weapon that is formed against thee shall prosper." The Gospel *must* triumph over all opposition and hostility. My motto for the present is, "In quietness and confidence shall be your strength."'



I X.

Return to Amritsur, and Visit to Calcutta.

‘ He comes to break oppression,  
To set the captive free,  
To take away transgression,  
And rule in equity.

He comes with succour speedy,  
To those who suffer wrong ;  
To help the poor and needy,  
And bid the weak be strong ;

To give them songs for sighing,  
Their darkness turn to light,  
Whose souls, condemned and dying,  
Were precious in His sight.’



## CHAPTER IX.

### RETURN TO UMRITSUR, AND VISIT TO CALCUTTA.

THE following letter, addressed to Colonel Lake, dated Umritsur, February 22, 1868, continues the narrative of Dr. Elmslie's labours during the year under review:—

‘Your kind and interesting letter, dated December 1st, is now lying before me, and it affords me much pleasure to take up its different items, and answer them one by one. And first of all, let me express my joy at the news of Mrs. Lake's partial recovery, and probable complete restoration to health. I do sincerely hope, that Mrs. Lake's health has continued to improve ever since the date of your welcome letter, and that she is now able, with redoubled vigour, to enter afresh upon those labours of faith and love, which form the very atmosphere in which she lives. I feel almost sure that Mrs. Lake is better, from the fact that, a day or two ago, your kind common gift, *The Voices of the Prophets*, by Dr. Vaughan, reached me, with the inscription written in Mrs. Lake's well-known handwriting. Permit me, very heartily, to thank you and Mrs.



Lake for your kind remembrance of me. I will not forget Psalm xxvii. 14. The command is peculiarly suitable to me, in the present juncture of affairs in Kashmir.

‘I am very glad to hear of your spending part of your holiday at home, in stirring up the Church to a sense of her duty, in reference to the spread of the glorious Gospel of the grace of God, by giving information respecting the good work, in so far as it has come under your own observation. Your testimony regarding Indian missions is sure to do good. Few have enjoyed the opportunities of observation which you have.

‘You ask me to give you further information respecting the work of last season, and the time I have spent since I left Kashmir. If I remember rightly, my last letter to you was dated about July of last year, just at the time when cholera was at its acme in Srinagar. It raged furiously the whole of that month; and although the type of the epidemic was not of a very virulent nature, still great numbers were carried off. It was especially fatal among women and children. Towards the beginning of August, the virulence of the disease had decidedly abated, and by the end of that month, scarcely a case occurred in the whole city. It had entirely left the city by the 15th September. The epidemic, therefore, lasted from the 8th June till the 15th September, a duration of more than three months. It is very sad to have to state, that the

local authorities, with unheard-of cruelty, did all in their power to prevent me visiting the poor, pestilence-stricken inhabitants of Srinagar. They had the effrontery to request the British Resident to prohibit my frequenting the city for the purpose of visiting the sick. This, he said, he would not do. I feel quite sure that, had the local Government acceded to my offer to co-operate with them in battling the common enemy, the mortality would have been less, with God's blessing on our efforts. But, as I said, they did everything in their power to prevent and frustrate my efforts to assist the poor people, who were left in the hands of the ignorant, cruel, and mercenary Hakims. The neglect, cruelty, and rapacity which I witnessed during that epidemic are inconceivable. As a specimen, I may mention this fact: When the cholera was at its worst, it was announced in the city, that His Highness the Maharajah had discovered an effectual cure for the disease. This cure consisted of a printed *manthar* or charm, which was to be repeated, and pasted above the doors of the houses. This charm, it was announced, was not only curative, but preventive also. Each copy cost four annas (sixpence), and was to be had at the Maharajah's post-office. I went and bought several copies. I have them in my possession now. Large numbers of the Hindus bought them; but, poor people, they soon discovered their inefficiency. I could mention more things of a piece with this, but space forbids.

‘During the whole of last season, the opposition of the local Government to my work was most bitter and continued. On returning to the Punjab, I met at Umritsur, our Secretary, the Rev. E. C. Stuart, who, at the Annual Conference, strongly expressed his opinion, that it was most desirable that I should accompany him to Calcutta, and, if possible, have a private interview with Sir John Lawrence respecting the state of Kashmir. In this opinion the other members of the Conference agreed, so that it was decided I should go to Calcutta, and, if possible, see his Excellency. Some short time after the Conference, I went to Calcutta, and, on the second of January, breakfasted with his Excellency; after which, he took me into his private room, and entered most fully and particularly into the state of Kashmir. His Excellency was extremely kind, frank, and affable. It is sincerely to be hoped, that something decided will be done by our Government; for it certainly cannot be right for a professedly Christian Government to tolerate the rule of a tributary, in whose country it is a crime for one of his subjects to read the Bible, or even to inquire about Christianity. You will likely have heard that Mr. Roberts has been appointed Resident in Kashmir for next season. There is cause for great thankfulness in this. But, so bad have things become there, that the disease is not to be cured merely by a change of Resident. The Supreme Government must speak to His Highness in no

uncertain sounds, before the oppressed people of Kashmir enjoy that political and religious liberty which is their right, by virtue of their being subjects of our gracious Queen. I am glad to see by the *Intelligencer* that the Directors of the Church Missionary Society are, at last, weary with waiting, and appear ready to use their influence to obtain freedom for the poor Kashmiris.

‘After my return from Calcutta, I opened my dispensary in Umritsur, where I am now carrying on my operations. I am sorry to say nothing further has been done respecting the Training Institution. As the Church Missionary Society has a mission in Lahore, I hope they may soon see the way clear to their attaching a medical missionary to it, and so enable us to carry out the training scheme. I fear the Punjab Medical Missionary Society cannot, at present at least, lend much pecuniary aid to the undertaking. If medical missions are ever to do extensive good in India, it will only be through a native agency. I hope you will have an opportunity of speaking to the Committee on this important point. There is a fine field in Umritsur for a medical mission; and Mr. Clark, convinced of this, has written home to Mr. Venn a very urgent request for a medical missionary, stating it as his firm conviction, that the good cause would be likely to gain here, were one of the four missionaries, forming the full missionary staff of the Umritsur Station, to be a medical missionary. Mr. Clark asked me to write

a memorandum on his letter to Mr. Venn, which I did. Peshawur is another post where, I feel sure, a good medical missionary would be of immense service, both politically and religiously. Men and money are needed; or rather, there appears to be a greater lack of the latter than of the former at present. This is far from creditable to wealthy England.

‘While over in Lahore some time ago, I spent a very pleasant evening with Col. and Mrs. Crofton, Mr. Newbery, and Dr. Gray, singing, after dinner, the old hymns. I hope we may soon have the pleasure of again singing these same old hymns on Indian soil.’ . . .

The following extracts from a letter, addressed to Mrs. Cleghorn, give a few more details regarding Dr. Elmslie’s engagements during 1867–8:—

‘At the end of last season, after my return from Kashmir, I had a good deal of running about. It was decided at the Missionary Conference which was held at Umritsur in November, that I should accompany a missionary brother to Peshawur, for the purpose of inspecting some buildings there, as to their suitableness for medical missionary purposes. At the same meeting it was also decided, that, on my return from Peshawur, I should visit Calcutta, for the purpose of having a private interview with Sir John Lawrence, as to the state of Kashmir. Well, having visited Peshawur, which I consider a

most excellent post for a medical mission, I went to Calcutta, and saw several dear and old friends. There was dear and good Dr. Farquhar, as kind and good as ever; there was Sir William Muir, also not a bit changed, except for the better, for all the honours which have recently been heaped upon him. But there was no Dr. or Mrs. Cleghorn living in the lofty big house in fashionable Chowringhee; and, of course, there were no pleasant Sabbath evening meetings in the upper room, in that same lofty house, as formerly, when you and the Doctor, Drs. Farquhar and Hathaway, and Sir W., then Mr. Muir, and the raw medical missionary, used to meet for prayer, and the singing of sweet hymns, and the reading of the precious word. A look at the old house brought all this back to my mind, and then I thought of you and the Doctor, and wondered where you were, how you were, and what you were doing. . . .

‘After my return from Calcutta in January, I opened my dispensary in Umritsur, and had every reason to be satisfied with the result of the work there. The Rev. R. Clark, who took such an active part in organizing the Kashmir medical mission, sent home to the Church Missionary Society an urgent appeal for a medical missionary to be settled permanently at Umritsur. But I suppose the answer will be—“No money, no man.” May God grant both, if the work is for His glory, and the good, temporal and spiritual, of the people.’



Writing to the Rev. E. C. Stuart, Secretary of the Church Missionary Society at Calcutta, he says:—

‘It is my intention this season, if spared, to write to you, from time to time, very full accounts of all that goes on, that you, as Secretary, may make what use you like of the information which I shall send you. You know my policy pretty well now. I mean to show the same respect and deference as I have hitherto done; but in anything that may be done, at all calculated to interfere with or obstruct my labours amongst the poor Kashmiris, I shall take the same decided stand as before. I shall always be glad to have your advice, and will, from time to time, ask you to favour me with it.

‘How goes “philosophy”? I should like very much to hear your prelections. I hold that every physician should be more or less of a mental philosopher. I have often thought, that it is a grave omission in a medical student’s course of study, that there is no logic and mental philosophy. If medical students had a little more to do with the mind during their studies, perhaps there would be less materialism and infidelity amongst them. What do you think? I have often thought of writing to Professor Balfour on this point. What about the subject in *your* course of study for medical students in Calcutta?

‘How completely I must have deceived you, whilst staying with you in hoary No. 8! My philosophy quiet! It’s all you know, my dear friend. I know I have enough to do to ride my steed, snaffle, bit,



martingale, and all. It is Galilee's Lake over again with me, very often,—now calm, serene, and peaceful; now troubled, dark, and stormy. It is only when the Great Storm-calmer says, in almighty and loving accents, "Peace, be still," that quietness ever reigns within.

'A month hence, I shall be off to my mountains again. I wish much you could share with me the enjoyment of their beauty and grandeur. Couldn't you and Barton take a pedestrian tour over the hills? Such a trip would be like a fresh lease of life to you both, and perhaps save the necessity of a trip home.

'Umritsur is the place for a medical mission, when you have the money and the man. The house we rented here some time ago is now too small for us. Yesterday we had sixty-five patients; to-day, I think, about the same number. We have had a good many surgical operations.

'I am trying to catch with the net of the Truth, two patients who have been attending for some time. One is a Hindu, the other is a Mussulman—very bitter,—a hopeful sign, I always think.'

Thankful for the opportunity he had enjoyed, of representing Kashmir's wrongs to the head of the Supreme Government, and hopeful that, as the result, he would find, on his return to Kashmir, more toleration, and less cruelty and oppression; cheered, likewise, with the intercourse he had

enjoyed with old friends at Calcutta,—which, after such trials of his faith and patience, must have been truly refreshing,—Dr. Elmslie closed his labours at Umritsur for the season, and prepared once more for his return to Kashmir.

X.

Fourth Year's Labours.

“Be not weary,” toiling Christian, good the Master thou  
dost serve ;  
Let no disappointment move thee, from the service never  
swerve :  
Sow in hope, nor cease thy sowing ; lack not patience,  
faith, or prayer ;  
Seed-time passeth—harvest hasteneth—precious sheaves  
thou *then* shalt bear.

“Be not weary,” hoping Christian, though the vision  
tarry long ;  
Hope will bring the blessing nearer—change thy sorrow  
into song.  
Nought shall press thy spirit downwards, if thy hopes  
all brightly shine ;  
*Hold thy hope*, whate’er thou lovest ;—living, precious  
hopes are thine.’



## CHAPTER X.

### FOURTH YEAR'S LABOURS.

HAVING completed all necessary arrangements for his journey to Kashmir, and his stay there, Dr. Elmslie, with his native assistants, left Umritsur early in April, traversing the usual route, *via* Bimbar and Poonch. All along the route, as on former occasions, he remembered his Master's injunction, 'Into whatsoever city ye enter, heal the sick that are therein, and say unto them, The kingdom of God is come nigh unto you.' And here we may be allowed to deviate from our narrative, to observe how truly Christ-like and apostolic such a mission as the one we are now reviewing is. The medical missionary, working 'with both hands earnestly,' dispensing medicine for the body and healing for the soul, may well say with the great apostle, 'I magnify mine office;' for he, of all others, follows most closely the footsteps of Him who 'went about among all the cities and villages, teaching and preaching in their synagogues, and healing all manner of sickness and disease among the people,' and who, when He sent forth His disciples,

commissioned them to 'preach the kingdom of God, and to heal the sick.' True, it was by the forth-putting of His own divine power, that Christ did those mighty works which spread His fame throughout all Syria; and it was in virtue of their miraculous endowments, that His apostles made the deaf to hear, the blind to see, and the lame to walk. True, too, the age of miracles is past; but, by incorporating medical missions with our ordinary evangelistic agencies, may we not, thereby, approximate more closely to the practice of Christ and His disciples, and obey more fully the Master's command?

Nay, more, may not the Church be chargeable with neglect of duty, if she fails to use, for the promotion of His cause, that which, both by precept and example, Christ Himself sanctioned and enjoined? When He sent forth His disciples to evangelize, He gives them the gift of tongues, so that, at once, they might fulfil His commission among all nations. He imparts to them, likewise, the gift of healing, so that 'they shall lay hands on the sick, and they shall recover.' Soon, however, those miraculous endowments were withdrawn; but now, though the gift of tongues, as essential as ever for the universal proclamation of the gospel, can only be acquired by patient, persevering study, the Church, nevertheless, accepts the responsibility, and acknowledges her Lord's command to 'preach the Gospel to every creature,' as binding upon her still.

And why not receive and fulfil our Lord's commission in its entirety, since, as for acquiring languages, means are likewise available for acquiring the art of healing? Why should not the Church avail herself of the science of medicine as well as that of philology, and send forth her servants, in obedience to her Lord's command, and in accordance with His example and that of His apostles, to 'preach the Gospel and to heal the sick'?

We cannot but think that, so far as this healing power was exercised as a practical manifestation of the benevolent spirit of the Gospel (as much needed now as ever), the argument, that because the first missionaries were *miraculously* endowed with this gift, therefore, we are not now called upon to employ the healing art in our evangelistic efforts, would, we fear, if valid, clear us of responsibility in regard to the carrying out of Christ's great commission, 'Go ye into all the world, and preach the Gospel to every creature.'

It would be too much to require that every missionary should be a physician; but, should there not be a medical mission, with its hospital and dispensary, established as part of every localized mission? We think there ought. To some this may seem an utopian idea; but such, fifty years ago, were reckoned most of our now flourishing missionary schemes. We rejoice to know that this is the aim and object of the Edinburgh Medical Missionary Society, and hence it claims the sympathy and



support of all who pray from the heart, 'Thy kingdom come.'

In advocating the more general employment of this agency in our evangelistic operations, both at home and abroad, we by no means under-estimate the value of other departments of missionary work. It is simply as a divinely appointed *auxiliary*, that we claim for medical missions the place that it occupied in the days of the early Church; and we think the time is not far distant, when the healing art will be universally recognised as the handmaid of religion, and, because of the blessings it imparts, and the influence it gives, be more largely consecrated upon the missionary altar.

Proceeding with our narrative, the first communication we have from Dr. Elmslie, giving any account of his work during 1868, is addressed to Mrs. Cleg-horn, and dated Srinagar, Kashmir, 19th May 1868:—

'I arrived here on the 1st instant, and have now my dispensary in vigorous working order. How I long to be allowed to settle here, and to carry on my work without these periodical breaks! I am like Noah's dove. The work greatly suffers by these frequent interruptions, as you can easily fancy. Will you make this a matter of prayer? I long for an hospital too; that is another desideratum for both the medical and the spiritual work. If you saw the shifts I have to make, you would be

amazed and smile. But I firmly believe that there is a better day in store for poor Kashmir. I need not now tell you of my griefs and disappointments and discouragements; suffice it to say, I have all these. But should we expect to be different from our Divine Lord? It is enough for the disciple to be as his Lord. I count upon your prayers.

‘One of the two converts of last season is reported to have died in Umritsur, shortly after his arrival there. They say he died declaring his firm faith in Jesus. The other convert must have left Umritsur before my return, for I was unable to find him.’

About this time, a special effort was made by the Edinburgh Medical Missionary Society to raise a suitable memorial to the memory of the late Professor Miller, one of the Vice-Presidents of the Society, in whose death, the cause lost one of its warmest friends and an eloquent and earnest advocate. The memorial took the appropriate form of the Medical Missionary Training Institution in George Square, where, now, the Society's students find a home while they are prosecuting their studies at the University or extramural Medical School, and enjoy opportunities of becoming practically acquainted with medical missionary work, while attending, as part of their curriculum of study, the Mission Dispensary in the Cowgate.

Dr. Elmslie took the deepest interest in all that

pertained to the advancement of the Society's interests, and especially in the promotion of the 'Miller Memorial' scheme.

Writing to Mr. Bell, he says: 'Extremely glad am I to learn from you that the Medical Mission principle continues to progress. Although this is certainly a reason for our being very glad and thankful, yet one cannot help feeling a little sorrow and regret, that medical men generally do not manifest a livelier interest in this work, which belongs peculiarly to the profession of which we have the honour to be members. When one calls to mind the fact, that there are more than 20,000 doctors in practice in Great Britain alone, one does feel stirred up to pray earnestly, that God would speedily send into this harvest-field more of those labourers whose peculiar duty it is to labour therein. I am very much interested in all that you tell me about "39" (The Cowgate Mission Dispensary). The changes which you have recently made there are a step in the right direction. Indeed, it is a most desirable thing for the success of Medical Missions, that you should have in Edinburgh such buildings as will be healthy, commodious, and conveniently situated. What a magnificent building and house, suitable in every respect, might be built near the present site, if you possessed only money sufficient! I mean, if you could build a house like the Scottish Reformation Society's, and next door to it. You would then

have the Dispensary down in the Cowgate, where it is and ought to be, and, on a healthier level, but part of the same building, the rooms of the Superintendent and Resident Students. A very large sum would not be required to build such premises as I have alluded to. Four or five thousand pounds would be amply sufficient. This is not a very large sum. The doctors alone might collect it. It would be as nothing to some of our merchant princes. I do really think a strenuous effort should be made by the Society to accomplish this object.'

Writing on the 8th August 1868, in a letter to Dr. Omond, Treasurer of the Edinburgh Medical Missionary Society, in which Dr. Elmslie encloses a cheque for £25 for the 'Miller Memorial,' 'as a thankoffering from a medical missionary in the foreign field,' he says, regarding his mission, what we cannot but read with thankful hearts, remembering all the trials, difficulties, and opposition he had to contend with during the previous year:—

'You will be happy to learn that, in a medical and surgical point of view, the current season is by far the most successful year the Kashmir Medical Mission has met with. No case of decided conversion and application for baptism has as yet occurred this season; but the people are much less bigoted, and far more friendly, and inclined to read and listen to the good news.'

The following letter is addressed to Mrs. Lake, and dated Srinagar, 12th October 1868:—

‘Your two welcome letters, dated respectively 17th July and 19th August, are now lying before me, on this deal table, clamorous for an answer. I address myself with pleasure to the very agreeable task of complying with their most reasonable demands. Let me, first of all, sincerely thank you for being so kind as to think of me when you were distributing, among your many friends, the first-fruits of your recovery, in the way of letters. I appreciate your kindness very highly. I need scarcely say, that I was delighted when I saw again your welcome and well-known handwriting. Now that, through God’s blessing, you have weathered this long storm of sickness, I hope and pray that there is before you much smooth sea and cloudless sky. I do not know how it is with you, but a storm does me good. At the time it rages, it is far from pleasant, but afterwards come the “peaceable fruits.” After an attack of sickness, or a disappointment, or a heavy bereavement, the gripe of the world is decidedly less strong upon our hearts, and unseen and eternal verities become more distinct to our view, and rise in our estimation. It is very sad to think that we, who have received so much of the Father’s love, should need these storms; for we may rest assured that they *are* greatly required, otherwise our Father would not send them upon us. But far better to be chastened by a loving and all-

wise Father, than allowed to have our own will, and perish for ever. Far better be bruised, ay, severely bruised, and thus rescued from the vortex of the world's Maelstrom, than be sucked in, to perish irretrievably. All that frees from the power and pollution of sin,—all that lifts us above the world,—all that assimilates us to Jesus, whether it be bitter or sweet, ought to be welcomed by us. And, blessed be God, He does enable us to say, in our heart of hearts, even when the cup is most bitter, and we would fain have it pass from us, “Nevertheless, not my will, but Thine be done.” I can easily fancy that Joshua, and his noble companion Caleb, would lightly esteem, and almost entirely forget, all that they had suffered in the wilderness, when they reached the Promised Land; and I firmly believe that, when we reach *our* Promised Land, *we* too shall forget all the trials and storms of the long and difficult path. In all probability, we shall then become acquainted with the reason which our heavenly Father had for all His present inscrutable dealings with us. Pardon me for this preaching, or something like it, and not letter-writing.

‘It is something to be thankful for, that Colonel Lake has the gift of public speaking. This gift, especially in England, is one of immense value and power; and, as you very truly say, the people at home are always more ready to listen to a layman than to a clergyman or paid agent. I mean about



missions. Colonel Lake may do the mission cause immense service, by telling Christians and others in England, what is being done in India for the spread of the Gospel of our Lord. No man belonging to the Punjab is so well fitted as Colonel Lake for this work. I have seen one or two of Colonel Lake's speeches, and I think they are admirably calculated to stir up Christians at home to take a growing interest in missionary effort, more especially in India. I am very glad to learn that the Church Missionary Society have the wisdom to utilize Colonel Lake's intimate knowledge of missionary operations in the Punjab. One part of your letter was far from agreeable to me. That was the part where you tell me that you have decided on not returning to India. I am so selfish as to be very sorry to hear this. Indeed, to tell you the truth, Lahore has not been to me like the same place since you left it. When going to live in your house, I always felt as if I were going *home*; and, indeed, I did call you my Lahore mother! So you can form some faint idea of how much I miss you. And then there is the Punjab Medical Missionary Society, which sorely misses Colonel Lake.

‘I fear medical missions are not likely soon to spread in the Punjab, or, indeed, anywhere else. Men and money are so scarce. You will be sorry to learn that nothing has, as yet, been done with respect to the training of native medical missionaries. I refer to the Lahore Medical Missionary Training



Institution. I think the friends of this most needful and feasible scheme are waiting to see the good people of the North-West carry out their intention of setting on foot such an Institution. I think this delay is a pity, because their success is not likely to benefit the Punjab. They will have enough to do to supply home, not to speak of exporting. And I fear, even if the Institution of the North-West prove a success, that we in the Punjab shall not be able to prevail upon our Punjabi converts to go all the way to Agra or Allahabad for their medical education. Besides, in my opinion, this is altogether unnecessary, seeing we have a good Medical School in Lahore.

‘You and Colonel Lake will be happy to learn that this year, so far as Medicine and Surgery are concerned, has been very successful,—indeed, the most successful year the mission has yet seen. From the 8th May last till the 12th October, to-day, a period of five months and four days, 4161 individual patients have received medical and surgical aid at the Mission Dispensary. All these persons have heard the Gospel, more or less, and many of them have obtained books. Many came very considerable distances. We have had several merchants from the interior of Asia as patients. Some of these have seen the Russians. But nearly the whole of the number are Kashmiris, living in the valley or on the surrounding mountains. The people are much less bigoted than formerly. We

can speak to them much more freely and plainly, without fear of offending them. A very large number of the inhabitants of the valley, both high and low, now look upon us as their friends, and, in their difficulties and sorrows, come to us for advice and sympathy.

‘As to decided converts, there are none this season. One family is in a very hopeful condition, as also my pundit. They are nothing more than hopeful. May God reveal Himself in Christ to them, and influence their hearts with love to Him, for what He has done for them.

‘A little progress is being made in the valley. The first school established in Kashmir by the Maharajah has just been opened. Its history is the following. The father of the family of which I have already spoken, was particularly desirous that his two sons, two very fine lads, should learn a little English. He asked me if I would teach them. I said I had not time to do so, for my medical and other duties; but I would allow one of my assistants, who knew a little English, to teach his sons. One of the two lads has been very regular in his attendance, and has made some progress. A report of all this was carried to the Dewan, the Maharajah’s representative in the valley. Thereafter, a vigorous effort was made to get the father to give up sending his son to the mission bungalow to learn English. The effort failed, however. The father, I must tell you, is a Pathan, and is not so much afraid of

the Kashmir Government as indigenous Kashmiris generally are. The Maharajah, in due time, received a full account of all that was going on; and His Highness, after some time, gave orders for the opening of a school for the teaching of Arabic, and requested the Dewan to try to prevail upon Sher Ali, my Pathan friend, to desist from sending his sons to the Doctor Sahib to receive instruction in English. In this effort, I am happy to say, the Dewan failed. The boys come daily to us. This class for Arabic, got up primarily to decoy Sher Ali's sons away from us, is the *first Government school* the valley has seen during the reign of Gulab Sing and his son, the present Maharajah. The class, I am told, is intended exclusively for the sons of those who may be called the nobility of Kashmir. It is a pity the language was not Persian, and the school intended for any willing to attend.'

In his report for the year under review, Dr. Elmslie writes:—

'I advert, first of all, to the gratifying fact that the opposition shown to the mission last season, by the Maharajah's Government, was considerably less open and bitter than it had been the previous year. This is creditable alike to His Highness and his officials in the valley, and is indicative (one would fain hope) of a radical change for the better having taken place in the Maharajah's policy.

'As a natural consequence of the lessened opposi-

tion, the number of sick who daily frequented the dispensary greatly increased. During the season, 4450 patients received medical and surgical treatment. The increase, therefore, last season, in the number of patients treated, over that of the next most successful year, was 1085. This augmentation was probably partly due to the Christian sympathy and help, which God enabled the mission agents to render to the pestilence-stricken inhabitants of Srinagar in 1867, when a fatal epidemic of cholera raged extensively in the valley. Undoubtedly, one of the effects of that season's work has been to establish the mission, more firmly than ever, in the affections of the people.

‘The effort to evangelize the degraded Kashmiris, is the peculiar feature of the medical mission which is most distasteful to the local Government; nor is this to be wondered at. In Kashmir, as well as elsewhere, it is well known, that a tyrannical Government finds it considerably easier to rule over an ignorant and debased people, than over one enlightened and morally elevated. The local Government make no secret of their dislike and hostility to the Gospel. The inhabitants of the valley, knowing this, are more or less intimidated, and several of them are probably deterred from declaring themselves Christians, when, secretly and in their hearts, they love and believe in the Saviour. In nature, seeds previously subjected to a great degree of cold, and afterwards planted in favourable cir-

cumstances, germinate and come to maturity much more quickly than seeds not so treated previously. It may be God's intention, that the present chilling, repressive policy of the rulers of Kashmir shall have an analogously happy effect on the spread of Christianity in this valley. But, be this as it may, year by year, during the brief season of six months that the mission is allowed to remain in the country, much Gospel seed is sown, of which a grain now, and another then, takes root and bears fruit.

‘It is greatly cheering and encouraging to faith and effort, in the midst of this wicked world's opposition to the Gospel, to see and hear of that same despised and rejected Gospel conquering human hearts, and bringing them into subjection to the Lord of life. News has just reached the mission, that the aged mother-in-law of Kadir Baksh (the Kashmir Catechist) died, some time ago, in her distant Kashmir village, looking to Jesus as her divine Saviour. The dear old woman had repeatedly listened to the Gospel from the lips of her faithful and zealous son-in-law. A visit which she paid to the dispensary last season, appears to have been greatly blessed of God to her soul. .

‘Remembering the peculiarly unfavourable circumstances in which the medical mission is placed in Kashmir—how it is obliged to occupy a small bungalow, at a considerable distance from the city of Srinagar, instead of being located in the midst of the

people—how it is annually compelled by the native Government, with the sanction and knowledge of the Supreme Government of India, to intermit its operations in the valley for six long months each year—how bigoted and fiery Mohammedan Mullahs denounce it from their pulpits—how the Kashmiris are generally steeped in the grossest ignorance and moral debasement—and how the Maharajah's Government angrily frowns upon it, and carries on a most vigilant and incessant system of espionage; remembering all this, we cannot but rejoice and be thankful, that God gives us the privilege of alleviating so much human suffering, and the opportunity of bringing the glorious Gospel of His grace to the notice of so many thousands of our perishing fellow-creatures.

'The Lord Bishop of Calcutta, accompanied by his private chaplain, the Rev. M. R. Burge, and the Rev. J. R. Baldwin, visited the Medical Mission one morning during his brief sojourn in the valley, and conducted the Hindustani prayers in the Dispensary.

'The Dispensary was closed on the 19th October, and preparations were made for quitting the valley during the cold season, agreeably to the order of the Supreme Government of India. The Mission staff returned to Umritsur, *via* the Pir Panjal Pass and Bimbhar. Receptions for the sick were held at eleven halting-places on the line of march. Religious services, similar to those held at Srinagar, were performed at these receptions.



‘During the cold season, the Medical Mission Dispensary was opened in the city of Umritsur, and sixty-six receptions for the sick were held. Of the 622 patients treated surgically and medically, 199 were females, and 423 males. With respect to religion, 25 were Christians, 256 Mussulmans, and 330 Hindus and Sikhs. The operations of the Medical Mission in Umritsur were in every respect similar to what they had been in Kashmir.’

‘Surely the wrath of man shall praise Thee, the remainder of wrath shalt Thou restrain.’ During 1867, when intolerance, persecution, and tyranny had reached their climax, when God’s judgments were abroad upon the land, then the cry went up to God on behalf of oppressed, down-trodden, and stricken Kashmir, and that cry ‘entered into the ears of the Lord of Sabaoth.’ *How* God answered the prayers of His remembrancers we cannot tell; but this we know, the promise upon which He caused His servant to hope was fulfilled: ‘Wait on the Lord, be of good courage, and He shall strengthen thine heart; wait, I say, on the Lord.’





XI.

Fifth Year's Labours.

‘ He went in the strength of dependance,  
To tread where the Master trod,  
To gather and knit together  
The family of God ;

As one whose home is in heaven,  
To pass through this world of sin,  
With a heart diffusing the balm of peace  
From the place of peace within ;

With a conscience freed from burdens,  
And a heart set free from care,  
To minister to every one,  
Always and everywhere.’

—*The Three Wakings.*



## CHAPTER XI.

### FIFTH YEAR'S LABOURS.

WE come now to the review of the last year of Dr. Elmslie's labours in India, previous to his return to England, for a short sojourn in his native land. His fifth annual report is deeply interesting, showing, as it does, the gradual dawning of a brighter day on Kashmir.

Many a time, no doubt, on this occasion, in crossing those mountain passes on his way to Srinagar, the glorious sunrise had impressed his mind, as in hill stations in India it has often impressed ours, with a spiritual significance. First of all, amid the darkness, a faint glimmer is seen streaking the highest peak of the distant ranges; by and by, fringed with a golden halo, the outline of a lower peak becomes visible; and then, in quick succession, one, and another, and another of the nearer mountain-tops catch the rays of the rising sun, until the sun itself, rising in unclouded splendour above the horizon, chases away the darkness, and floods the valley with light;—and, gazing on such a scene, emblematical to him of something still more sublime

and glorious, his heart would glow with grateful and joyous emotions; while, through the darkness, he thought he could discern the faint streak gilding the mountain-tops, harbinger of the Sun of righteousness dawning on Kashmir, with healing in His wings.

At the chief halting-places between Umritsur and Srinagar, as usual, receptions for the sick were held. Many of the cases treated were intermittent fever, which is very prevalent amongst the lower hills and valleys of the Himalayas. 'All along the line of march,' Dr. Elmslie writes, 'the demands for quinine, both for present and future use, were numerous and importunate. It is to be hoped that the day is not far distant, when the Cinchona tree will find a *habitat* along the whole Himalayan range, as no greater physical boon could be bestowed on the fever-stricken inhabitants of those regions.'

In the page reserved in *Christian Work* for the Edinburgh Medical Missionary Society's communications, in the November number 1869, there is a letter from Dr. Elmslie, giving interesting details of his labours:—'I am again,' he writes, 'busy at work in this fairest spot of God's earth. After a very pleasant journey from Umritsur, over the Himalayas, I arrived here on the 30th April, and began work a few days after. On the march to the valley we had some interesting work, partly medical and partly evangelistic. The mission is becoming so well known in these mountainous regions,

that the poor people look out for our return in spring, as they do for that of the swallow. The people's knowledge of Christ and the plan of salvation is yearly growing. I trust there is, at least, a leavening process going on in these mountains,—a sowing of seed—precious seed—which, when the fulness of time is come, will bear much fruit. The mission in the valley is gaining more and more influence, and is being frequented by ever-increasing numbers of sick. I am thankful that our numbers are increasing, because the more bodily sick that come to us, the more spiritually sick hear of the Balm of Gilead, and the Great Physician.

‘During the last month, the number of individual patients was well on to a thousand. I have just been writing my report of last year's work, and I see that our numbers increased 1085 over what they had been in the previous most successful season as to numbers. There are signs of softening in the opposition to the mission, I am happy and thankful to say, but I cannot speak definitely of them yet.’

Alluding in his report to those hopeful indications, Dr. Elmslie writes:—‘The Kashmir Medical Mission, at its commencement in 1865, unavoidably laboured under the adverse suspicion, on the part of the native authorities of the valley, of being political in its character and aims. In all probability, this erroneous suspicion accounts, in part at least,

for the opposition shown to the mission by His Highness the Maharajah's Government. Be this as it may, it is gratifying to be able to report, that this damaging suspicion is almost, if not altogether, dissipated, and that the rulers of Kashmir continue to be outwardly less hostile to the medical mission than formerly. The circle of the mission's influence and beneficence continues to widen. Besides Kashmiris, patients from Poonch, Rajauri, Kishtawar, Ladak, and even from the distant and inhospitable regions towards Iskardo and Gilghit, frequented the dispensary, and heard, for the first time in their life, the marvellous story of the Cross. Several Kashmiris were in a hopeful religious condition, and two positively declared themselves Christians, and left the valley at the end of the season, as it is impossible, at present, for native Christians to remain in Kashmir during the absence of Europeans. In no former season were demands for copies of the Holy Scriptures and other religious books so numerous and importunate. The works of the Rev. Maulavie Imad-un-Din, of the Umritsur Mission, were in special request. Two Mullahs, or Mussulman priests, who had heard of his well-known work, the *Hidaiyat ul Musulmin*, came to the dispensary, from a distant part of the surrounding mountains, to obtain a copy. Much interest on religious subjects was manifested by a band of young Hindus, who read with avidity the books given to them. Hitherto, religious books have been distributed



gratuitously among those capable of reading them ; but as some little thirst for reading and religious knowledge has been excited in the minds of many Kashmiris, it is believed that the time has now arrived for making a small charge for such works.

‘The Sunday afternoon meetings with the beggars and the incurably blind and lame of Srinagar were held regularly, as in former seasons. Every Sunday afternoon, at one o’clock, from sixty to eighty of those unfortunates assembled on the lawn, behind the mission bungalow, or near to the mission tents, and, after listening to the reading and expounding of a suitable portion of Holy Scripture, and a prayer for the Divine blessing, received alms, for which they appeared grateful. Two lame men seemed much impressed by what they had heard of the Gospel.

‘No change was made last season, in the manner of conducting the daily religious services of the dispensary. Every morning, at seven o’clock, the mission agents met together in the dispensary for prayer, after which they adjourned to the tent pitched behind the mission bungalow, where the sick and their relatives and friends had been assembled. A select, short, and appropriate passage of Holy Scripture was then read, and briefly and simply explained ; after which a short prayer was offered up to God, to pour down His rich blessing on the people, the Word read and explained, and upon the remedies about to be prescribed. In the

religious addresses delivered there were no political references, or direct attacks on Islamism and Hinduism, but the Gospel was simply preached; consequently, the behaviour of the people was uniformly markedly quiet, attentive, and decorous. Much precious seed was thus sown. God grant that it may not remain fruitless.'

One of the great hindrances to his work, which Dr. Elmslie experienced all along, was the lack of suitable hospital and dispensary accommodation; but now, even this want seemed about to be supplied. In the report from which we have already quoted, he writes :—

'It is to be deplored that the medical mission, notwithstanding its charitable and beneficent character, still unavoidably labours under great difficulties, from want of permanent and suitable hospital and dispensary buildings. Before our arrival in the valley, at the beginning of each season, it is impossible to tell where the mission may be located, as the local authorities have hitherto been averse to its either renting or building convenient premises. This being the case, one of the small bungalows at some distance from the city, and set apart by His Highness the Maharajah for the use of visitors, was occupied and fitted up as a dispensary and dwelling-house. To supplement the deficiencies of the bungalow, a tent was pitched on the lawn behind, for the patients with their friends to assemble in; and,

by way of hospital accommodation, rooms in different parts of the city had to be hired by patients coming from a distance,—an arrangement convenient neither to the sick nor to the doctor. I am happy to let in a feeble ray of hope on this matter. The Lord Bishop of Calcutta, during his short stay in Srinagar in 1868, saw how very deficient and unsuitable the mission premises were, and kindly promised to bring the matter under the notice of His Highness the Maharajah. This gracious promise his Lordship has since fulfilled, and we may therefore hope soon to hear the result.'

During the summer of 1869, a heavy flood occurred, which interfered somewhat with the operations of the mission. Regarding this Dr. Elmslie writes :—

'On the 10th June, an extraordinary flood occurred, and compelled the mission staff to vacate its premises, and seek for safety on the neighbouring heights. Whilst the waters of the inundation receded, and the mission bungalow underwent repairs, work was carried on in tents in the neighbourhood of Srinagar, as best we could, till the 4th of July, when the mission returned to its former quarters. On the 28th July a second extraordinary flood happened, and necessitated the mission staff a second time deserting the bungalow, and seeking for safety in retreat to a neighbouring hill. The waters of the flood having subsided, the mission

agents returned to the European quarters on the 16th of August. These interruptions were unfavourable to the surgical and medical work of the mission, and probably account for the slight diminution in the number of patients treated during the season.'

Regarding the increasing success of his dispensary operations, Dr. Elmslie thus writes:—

'Through the rich blessing of God, the medical and surgical department of the mission's operations continues to prosper, in spite of opposition and drawbacks, and to be the source of many temporal blessings, not only to the people of Kashmir, but also to the inhabitants of the adjacent mountains and valleys, who now find their way over lofty and difficult passes to the medical mission dispensary at Srinagar. All suspicion, prejudice, and distrust, on the part of the natives of those distant regions, have now, apparently, disappeared, and they are ready to submit to whatever treatment may be recommended for their cure. At the establishment of the medical mission in 1865, and for some time subsequently, it was no uncommon thing for patients requiring a surgical operation to leave the dispensary without submitting to it. Seldom or never does such a case occur now. Indeed, so strong has the faith of the Kashmiri in the knife, as a remedial agent, become, that he not unfrequently implores the medical missionary to treat a purely medical ailment according

to surgical principles. The success which has attended the surgical operations of the dispensary, the comparative certainty and celerity of cure, and the use of chloroform, probably account satisfactorily for this amusing preference of the Kashmiri for surgery.

‘The patients who frequent the medical mission generally belong to the lower and middle classes. But, last season, two of the higher officials of the valley, who had been ill for some time, and had spent considerable sums of money on their native Hakims, but were nothing bettered, at last applied in their helplessness to the medical mission dispensary; and after taking appropriate remedies for a time, both were restored to perfect health; and as no fees are taken from dispensary patients, they are held perpetual debtors to the mission.

‘From the 6th May till the 25th October, 169 receptions for the sick were held, and 3902 patients received surgical and medical treatment. The average daily attendance of *new* patients was therefore 23; and as the number of individual visits paid to the mission dispensary during the season was 15,579, the average daily attendance of old and new patients was 93. Each patient, on an average, visited the dispensary four times.

‘Of the 3902 patients treated, 1343 were females, and 2559 were males. According to religion, 7 were Christians, 3 Parsees, 362 Hindus, and 3530 were Mussulmans.

‘From the list of the diseases treated during the season, it appears that ophthalmic and cutaneous ailments are prevalent in the valley. It is deplorable that the class of diseases which gauge the *morale* of a people should form so prominent an item in the list.

‘On the 25th October the dispensary was closed, and preparations were made to quit Kashmir and return to the Punjab, in accordance with the order, still in force, with the sanction of the Supreme Government, that no European shall remain in the valley from the 15th October till the 15th April. Not unfrequently, exceptions to this rule are made in the case of sportsmen; but the medical mission, notwithstanding its charitable and benevolent character, has hitherto been unable to obtain permission to remain in Kashmir during the winter months.’

The foregoing letters and extracts from Dr. Elmslie's reports give, at the best, but a very faint idea of his abundant labours in India from 1865 till the close of 1869. They enable us, however, to form some conception of the difficulties, trials, and success of his missionary career. They reveal somewhat of his noble character, his indomitable energy, his unwavering trust in God, and his firm faith in the final triumph of His cause. The state of affairs in Kashmir required a man of no ordinary gifts and graces to inaugurate mission work there.



Unlike the circumstances in which the writer carried on his work in the province of Travancore, where the Maharajah and the native Government officials cordially and liberally supported the medical mission, the Maharajah of Kashmir and his underlings did everything in their power to thwart the enterprise. It needed, therefore, a man of great prudence and courage, as well as of strong faith, to be the pioneer of mission work in Kashmir; and these qualifications Dr. Elmslie possessed in a remarkable degree. Notwithstanding frequent interruptions, much opposition and cruel persecution, with a calm determination of purpose, and a firm reliance on Divine help, Dr. Elmslie made the difficulties and discouragements that confronted him, but fresh starting-points for renewed effort, till, as we have seen, he succeeded, to a very great extent, in removing the prejudices, conciliating the affection, and gaining the confidence of the people among whom he laboured.

His letters, too, give us a glimpse of his inner life, his childlike trust in God, his tender, sympathizing disposition, the genial warmth of his friendship, the truthfulness of his manly character, and the singleness of his aim.

In tracing Dr. Elmslie's subsequent career, we have, alas, very little more to write regarding his work in Kashmir. We shall therefore close this portion of our narrative with the following state-



ment, made by one who knows the country, the people, and the work well:—

‘The experience gained by the Kashmir Mission has been the following:—

‘(1.) Open gross sins, on the part of professing English Christians, are a scandal and disgrace, not only to our religion, but to our Government and nation. When committed by English officers, they are an insult, not only to Christ, but to our Queen. There is nothing which discredits us so much in the eyes of the natives as immorality and vice. Many, alas! have visited the valley from selfish and wrong purposes; many have there plunged into deeds they are fain to regret, casting fearful stumbling-blocks in the way of the people, maligning Christianity, and rendering it almost abhorrent to those who have judged of it by the practices of its own professors.

‘(2.) We are not respected, but we are despised by the natives, if we neglect any duty enjoined by our religion, or if we allow them to deny us liberty to do what is permitted to every Hindoo and Mohammedan in the country.

‘(3.) Those men are the most honoured by the natives, who, as Christian individuals, use the means, in a Christian manner, to give them Christ’s Gospel.

‘(4.) As regards the mission, the door is open for the preaching of the Gospel in Kashmir; but the great hindrance to its free course is the law which requires every European and native Christian to

quit the valley on the approach of the cold weather. Let all Christians pray in faith for the removal of this great obstacle. "The effectual fervent prayer of a righteous man availeth much." "All things whatsoever ye shall ask in prayer, believing, ye shall receive." "Who art thou, O great mountain? before Zerubbabel thou shalt become a plain." If we had faith, such mountains would be removed at once, and cast into the sea.

'(5.) The mission must be sustained by faithful, prayerful efforts. All difficulties now experienced *must* soon cease. It can never be, that Christianity will *long* remain the only religion not tolerated in Kashmir. It can never be, that natives will be beaten, imprisoned, and expelled from Kashmir, for the sole reason of their being Christians. It can never long be, that temples and mosques will be allowed, and yet no Christian churches or schools be endured. The doctrine that a man's varying will is, for the time being, law, will hardly be maintained in any country by a ruler's best friends. It would make him a far greater sovereign than either our Viceroy or Queen, and give a power which even a Maharajah would be the first to disclaim. Christianity will yet be welcomed freely in Kashmir; for it enjoins obedience and respect to kings, and to all who are in authority, and seeks not the injury, but the prosperity, of rulers, whether Christian or Hindoo. It desires ever to give, not to receive. It seeks toleration,

indeed, but only to enable it to confer priceless good.

‘(6.) There are several Kashmiris who are now Christian men, and who adorn Christ’s Gospel by their faithful lives. Amongst them are three preachers of Christianity. The Kashmiris are men of much ability and quick perception. They have shown great decision of character and perseverance in following out what they believe to be truth. They are also a religious people. What they have done for religion in bygone days, we see in the wonderful ruins of Martund, and of great temples on every side. Kashmir was formerly celebrated for its learning; one of the three great Indian Buddhist councils was held in Kashmir. It sent forth once five hundred Buddhist missionaries to convert Thibet. God grant that the day may soon come, when great *Christian* councils may be held there too, and *Christian* preachers go forth to make known Christ, in the same lands in which they formerly planted the religion of Buddh.’

## XII.

### Zenana Medical Missions.

'Methinks I hear a voice from India's land :  
"Sweet sister, come and raise us by thy hand ;  
Fast bound we lie within Zenana walls  
In satan's chains, while sin our souls enthralls ;  
We may not come to you ; our laws deny  
To us that liberty which you enjoy.  
A ray of light has pierced e'en our dark homes,  
And we have heard the Lord of glory comes.  
Oh ! tell us of this wondrous, glorious plan  
Of the Great God, to save poor guilty man."

Dear Indian sister, we obey thy call ;  
And Faith rejoicing, sees the idols fall.

. . . . .  
This is the work to women He assigned,  
To feed the hungry, aid the sick and blind ;  
Hear Him, whose life was spent in doing good,  
Of woman say, "She hath done what she could."  
No longer we'll delay, but send with speed,  
Some Christian messengers your souls to feed,—  
Women, whose hearts with love to Christ o'erflow,  
Who long that you should His salvation know.'

*A Plea for the Zenana. A. M.*



## CHAPTER XII.

### ZENANA MEDICAL MISSIONS.

DURING the latter part of Dr. Elmslie's residence in India, previous to his return to England in 1870, the subject of Female Medical Mission Agency occupied much of his attention.

The importance of this department of service cannot be over-estimated, and there is great cause for thankfulness that the friends of missions are now realizing the necessity of incorporating this agency with their missionary organizations, especially for work in India, and in the East generally.

In a letter written shortly before he left India, addressed to Mr. William Coldstream, of the Bengal Civil Service, Dr. Elmslie says :—

‘I rejoice to hear the good news about the Delhi Female Medical Mission. This is a step of immense importance. I believe there is little hope for India, humanly speaking, till her mothers are raised and christianized. As long as the mothers of India remain degraded, ignorant, and sensual, as at present, we cannot but have a race in whom

there is nothing noble, pure, or holy. What would our own beloved native land become, were the influence of our Christian mothers to become nugatory? I tremble for the result. In almost every biography of great and good men, the mother's influence is in the foreground, and occupies the most prominent place amongst the various human influences that went to mould the man. Oh, if we could only get within these prisons of Zenanas! if we could only emancipate their benighted tenants, and lead them forth into the glorious liberty of the Gospel!—then might we look, with confidence, for the speedy dawning of a bright day on India's countless sons.

‘So much has my mind been filled with this thought, that I have resolved to bring the matter before the Punjab Medical Missionary Society, or some Society at home, in the form of a regularly drawn out scheme, as in the case of the Medical Missionary Training Institution for the Punjab.’

A scheme for training ladies for medical missionary service abroad has, for some time, been under the consideration of the Board of the Edinburgh Medical Missionary Society, and we are hopeful that ere long, whether in connection with the Edinburgh Society or otherwise, means may be provided for the thorough training of suitable candidates for this most important department of missionary service.

No one is entitled to speak with greater authority



on this subject than the Rev. Dr. Duff. The following extract from a letter which he addressed to the writer, with the request that it might be read at a Board Meeting of the Edinburgh Medical Missionary Society, at which he could not be present, will serve as a fitting preface to Dr. Elmslie's most instructive and able essay on Female Medical Missions for India. Dr. Duff writes :—

‘In case I should not be able to attend the Board Meeting of the Edinburgh Medical Missionary Society on Saturday morning, allow me, as briefly as possible, to state how the subject strikes me.

‘I am not at all in favour of the movement for what are called “mixed classes,” in our medical classes in the University. In principle, I can see no objection to a college established specially for the medical education of ladies.

‘Your Institute is not like a general University Medical School. It is a Christian Medical Missionary Institution, to prepare parties for turning medical knowledge to account in the great work of the world's evangelization.

‘Every educated person knows the peculiar position of Hindu females of the upper classes, and how entirely they are secluded, and how, in their case, a male medical missionary might find no access to them. But if a female missionary knew something of medical science and practice, readily would *she* find access, and, while applying her medical skill to the healing of the body, would have precious oppor-

tunities of applying the balm of spiritual healing to the worse diseases of the soul.

‘The state of things is peculiar and exceptional, and not only warrants, but demands, peculiar and exceptional measures. What these should be has already been pointed out, so clearly and unanswerably, in the January number of *The Indian Female Evangelist*, by the late able and devoted Dr. Elmslie, that I need only refer to it, and so avoid the necessity of going into any details.

‘Would to God we had such an agency ready for work! Soon might India be moved in its innermost recesses.’

With the kind permission of the Directors of ‘The Indian Female Normal School and Instruction Society,’ under whose auspices *The Indian Female Evangelist* is published, we transfer, unabridged, to the pages of these ‘Memorials,’ Dr. Elmslie’s valuable and suggestive paper, entitled

#### ‘FEMALE MEDICAL MISSIONS FOR INDIA.

‘One of the greatest questions which can occupy the minds of the Christian friends of India is, “How can her women be reached; and their intellectual, moral, and religious condition be improved?” The females of India number little short of one hundred millions. In trying to elevate this enormous mass of human life, the great difficulty met with, and to be overcome at the outset, is that of getting any

agency to bear directly and immediately on the women themselves; for millions of them are virtually prisoners within their own homes, and millions more of them are all but entirely excluded from Christian intercourse, by the social customs of their country. Any agency, therefore, which will open the doors of Indian Zenanas, and bring their benighted inmates into the clear, gladsome light of mental development, and Christian truth and purity, is surely worthy the serious consideration of all true friends of India.

‘It is well known that English education has, indirectly, done much for many of the women of India, in many parts of that great continent. In Calcutta, for example, a great many Zenanas have been opened by means of this key; and now, intellectual, moral, and religious light shines there to a greater or less extent. The same may be said of Bombay, Madras, and a few other parts of India. But the entrance of English education into Indian Zenanas, depends, entirely, on the value set on it by the male members of the family. If the male members of a household prize western science and learning, then, as a rule, the Christian Zenana-worker, with prudence and tact, experiences little difficulty in finding an entrance. In Bengal, English education has long been highly valued by the middle and upper classes; probably, in many instances, for its own sake, but, generally, for the many worldly advantages which it brings to those by whom it is

possessed. Through the wise and liberal policy of the Supreme Government of India, many well-paid posts have been thrown open to the educated natives. This has given an immense impetus to western learning. The Bengalis, from having wisely improved their opportunities, so long enjoyed, are now able to fill those posts in a creditable manner. This being the case, it is not difficult to see why English education should be highly appreciated by the natives of Bengal; and why, in consequence, the Bengali men should be willing, and even anxious, that their women should be educated. To the Bengali a very bright future is in store, should the present liberal policy of our Government continue. These remarks refer only to the middle and upper classes in Bengal. Alas for the lower orders, even of this highly favoured Presidency! Till lately, little had been done by the Supreme Government towards the education of the masses. In all probability, English education alone will be a sufficient means of opening the Zenanas of the middle and upper classes in Bengal. And, as the educated Bengali, being a Hindu, spreads himself over India, as the servant of the British Government, perhaps his good fortune will induce his co-religionists in other provinces of that great empire, to value what they formerly despised, and open the doors of their Zenanas to those noble women who, with one hand, feed the minds, and with the other, the souls of their pupils. But what of the Mussulmans of India, numbering

over 30,000,000? Up to this time, they, as a body, have sulkily stood aloof from English education, and, as a consequence, find themselves unable to cope with their Hindu fellow-countrymen in competing for Government posts now thrown open to them. With laudable exceptions here and there, the Mussulmans generally do not appreciate English education, and neglect those opportunities presented by Government for its acquirement. Therefore, they do not allow the Zenana-worker to enter their homes for the purpose of educating their women.<sup>1</sup> Besides this, bigotry and prejudice are very much stronger in the Mussulman than in the Hindu. The former is very ill affected towards the English Government in India. This is not much to be wondered at; for, not to speak of difference of race and religion, the English people have supplanted the Mohammedans in the Government of India. It is well known, that the Wahabi sect of Mussulmans is, at the present time, hatching mischief against the English Government, and, every now and again, some nest of Wahabi conspirators is discovered in some part of India.

‘The object aimed at in these few remarks is to show, that the agency of English education alone is

<sup>1</sup> The writer suspects, that the greater proportion of the Mussulman homes into which the Christian Zenana-worker is at present admitted, belong to Mohammedans in Government or Mission employ. The Society under whose auspices this valuable periodical (*Ind. Female Evangelist*) is published, might request their agents to collect statistics on this point.—W. J. E.

quite insufficient to gain for the Zenana-worker an entrance into Mohammedan homes, and that, politically, it is of the utmost importance to find some agency which, with the blessing of God resting upon it, will open up a way into those dark and dangerous dwellings for the Christian philanthropist and evangelist. Female Medical Missions, we believe, are calculated to be that agency.

‘But, would the Christian lady worker, in the exercise of her medical knowledge, be invading a domain already efficiently and fully occupied? Certainly not; for the women of India fare very badly for doctors. Were there no other reason in favour of female medical missions to India, than that of the humane endeavour to lessen human pain and save human life, that reason ought to speak loudly and persuasively to every pitiful and compassionate heart.

‘Seldom or never is a European doctor called in to see a native woman, suffering from any disease peculiar to women.

‘It is true that the British Government has long devoted its attention to the training of native medical men for service among their own countrymen. In Calcutta, Bombay, Madras, and Lahore, there are fully equipped medical schools, where, annually, many natives of the country complete their medical studies, and go forth to exercise the noble profession of alleviating pain and saving life. In most, if not in all, of the large cities and towns of India, there



are Government medical and surgical dispensaries, where male and female patients are gratuitously treated. But, it is a well-known fact, that the women do not avail themselves of those dispensaries to any great or proportionate extent. And it is not difficult to find at least one cogent reason for this in the social habits of the people. The Government dispensaries are, by far, too public in their character, men and women being treated promiscuously. The fact that the native medical men in charge of those dispensaries have received a western education in medicine and surgery militates against them. This would not hold in the case of a western. A very large proportion of the native medical men of Northern India are Bengalis; and that, too, is unfavourable to them, when serving out of their native province. Other reasons exist for the women of India not more generally availing themselves of Government dispensaries, but it is unnecessary at present to specify them.

‘The real doctors of India are the native hakims, who abound everywhere, and are totally ignorant of western medicine and surgery. Many of the Mussulman native doctors have a scanty knowledge of the old Greek system of medicine, which they have got through the Arabic. Generally, the medical lore of both Hindu and Mussulman hakims consists of a few useless and often disgusting nostrums, which have been handed down from sire to son for many generations. As to the diseases peculiar to



women and children, they simply know nothing of them; and, what is far worse, they have the confident conceit that they know a great deal. Besides being ignorant, they are excessively meddlesome, and so do incalculable and irretrievable mischief when they are called in. How much England owes to her Simpsons, Priestleys, Farres, and Wests! India is now without such men, and, in her present state, could not, and would not, to any great extent, avail herself of them. But she is ready, from the Himalayas to Cape Comorin, to receive, with open arms, any daughter of the West, who comes to assuage her pains and bind up her wounds. Moreover, the native doctors are not generally called upon to treat the women of the Zenanas. When they *are* called in, it is only to see the patient die, the time for doing anything, hopefully efficacious, having passed.

‘Besides the native doctors or hakims, there exists a numerous class of native nurses, who are, virtually, *all* the sick women of India have for doctors in their own homes. The native female nurses are generally very ignorant, meddlesome, and immoral. Very sad effects spring often from their gross ignorance and unlimited meddlesomeness. Countless mothers and children fall victims. The death-rate amongst Indian women and children is enormous, and quite out of due proportions. Surely, if these things are so, it is the duty of Christians in England, and especially of Christian women, to hold

out a helping and sympathizing hand to their suffering Indian sisters. From the foregoing remarks, it is evident that the women of the middle and upper classes are in great want of good medical advice and help, such as could be obtained at all times within their own homes. On account of the social habits of the people, medical aid, to be extensively accepted, must be given by women. They alone, whether they be natives or Europeans, have free access to the Zenanas. Generally, native women are much pleased by a visit from a foreign lady. Native gentlemen would only be too glad to call in even a European missionary lady possessed of the necessary medical knowledge, to see a beloved wife in the hour of her trial, or a darling sick child, the pride and hope of their home. Except in the Presidency and other large cities, western education is only appreciated by a comparatively small fraction of the people of India, because only a small number see its advantages ; but western medical and surgical skill is esteemed everywhere, is everywhere greatly needed, and, we believe, would be everywhere readily and thankfully received by the women of India, if offered to them in a manner harmonizing with the social customs of their country. Let us now recapitulate the different points which have been briefly touched in the previous remarks :—

‘1st, With the exception of the lowest classes, the women of India are virtually prisoners in their own homes.

‘2*d*, Their physical, intellectual, moral, and religious condition is dark and deplorable.

‘3*d*, Ameliorating influences, to be effectual, must be those which can enter the Zenanas of India.

‘4*th*, In those parts of India where education is prized by the men, the Christian Zenana educationalist will generally be admitted.

‘5*th*, Bengal, and one or two other parts of India, have shown a laudable readiness, in accepting the invaluable boon of western science and learning.

‘6*th*, The Mussulmans of India have not, as a body, followed the good example of the Bengalis and others, in accepting and promoting English education.

‘7*th*, The Mussulmans, as a body, are not well disposed towards the British rule in India.

‘8*th*, Their Zenanas are generally closed against the European female missionary, and, where exceptions to the contrary are met with, it is feared that they are explicable by the fact of the heads of the respective homes wishing to obtain favour with some missionary or Government official for selfish ends.

‘9*th*, The Government Medical Dispensaries are not patronized by the females of India, in any due proportion to their numbers and wants.

‘10*th*, The women of India are lamentably destitute of proper medical aid.

‘11*th*, The hakims, or native doctors of India, know nothing of the diseases peculiar to women, and are seldom consulted in such cases.

‘12*th*, The native nurses or midwives, who are virtually the only doctors of the women of India, are grossly ignorant of their work, very meddlesome in the discharge of their duties, and of most immoral character.

‘13*th*, From the constitution of social life in India, neither European nor native gentlemen can exert a direct influence for good on the female portion of the community.

‘These are some of the points which we have already touched, and the question now arises, Is there no other key but that of education with which to open the door to the inner social life of India? We think there is certainly one other such key, and that key is female medical missions. But what is meant by the phrase, female medical missions?

‘A female medical mission may be defined to be the practice of medicine by a lady, for the purpose not merely of curing, but of christianizing her patients. Now, it is not difficult to see, from what has been already said, how admirably suited such an agency is to the present condition and wants of the women of India. This is a key which may be said to fit every lock, for, we believe, that there are few, if any, homes into which the lady medical missionary would not be heartily welcomed and blessed for her humane efforts. She would find an entrance where the educational missionary would find the door closed. She would soften bigotry, remove prejudice, dispel ignorance, drive away gloom, and un-

obtrusively, but nevertheless effectually, deposit the all-pervading leaven of the Gospel in numberless hearts and homes.

‘But are we justified by Scripture in employing such an agency in missionary operations? No one who, even cursorily, reads the life of our Divine Saviour, as contained in the four Gospels, can have any doubt on this question. For of what was His blessed life made up, after He entered upon His ministry, but of holy lessons and miracles of healing, by which the loving spirit and divine origin of His mission were incontestably proved? The friends of female medical missions to India must be prepared to meet with no inconsiderable amount of opposition, on conventional grounds, in their efforts to promote this undertaking. But, it may be a comfort to them to remember, that no effort of a new shape, to ameliorate the condition of mankind, and to spread the Gospel, ever met *at first* with anything but the most bitter and determined opposition, and that, *too often*, from those of whom better things might have been expected.

‘A few words respecting the agents, and the professional training which should fit them for the efficient discharge of their important duties, seem necessary.

‘The most indispensable qualification in an agent, or lady medical missionary, is personal religion, and hearty devotion in the Saviour’s service. Without this, all other qualifications will be insufficient to

fit her for her trying work. She may possess no ordinary degree of intellect, and varied charms and accomplishments; but, unless her heart is fired with a genuine and ever steady love to her Saviour, and real desire to see her patients believe in Him, love Him, and serve Him, she had better not go to India.

‘Along with this indispensable qualification, a sound head and a loving heart are invaluable; for sound judgment and tact must often be needed to avoid unnecessarily rousing fears and prejudices, and so shutting up the door of the heart against the entrance of Scripture truth.

‘While doing her utmost professionally to relieve the pains of her patients, the chief aim of the lady medical missionary ought to be to christianize her patients. And, while losing no opportunity of expressly commending Christ to all within her influence, she should remember, in her walk and conversation, that we christianize by other things as well as by words; in short, that our whole lives speak either for or against the Saviour.

‘In present circumstances, it is not very easy to answer the question, how and where the lady medical missionary is to obtain her professional training. There can be no doubt that a medical missionary institution—with all the proper appliances, and a staff of Christian teachers, with its high Christian tone and warm missionary spirit—would, in every respect, be the best place and manner of training lady medical missionaries.



‘But, although the writer of this paper is tolerably well acquainted with medical missionary work in England, Scotland, and Ireland, he knows of no medical missionary institution of this character. There are at least two medical missionary training institutions, but they are on a limited scale, and destitute of the necessary staff of teachers and appliances and conveniences for this work, which ought to be wholly carried on in the premises. It would neither be difficult nor expensive to establish, in connection with mission work among the poor, in some district of London, a training institution such as is required.

‘However, as it will take some time to set a-going such an institution, and as it is desirable to begin work at once, some other way of accomplishing the end contemplated must be discovered.

‘It is scarcely necessary to say, that the lady missionary-students are not to be sent to any of the existing medical schools to study, along with gentlemen, the different branches of their professional course. “*Mixed classes*” cannot be condemned in too severe language. Gentlemen ought to study with gentlemen—ladies with ladies. Until there is a medical school for ladies, the necessary professional instruction ought to be given to the lady missionary in a private manner. There are in most of our large cities, and connected with our universities and medical colleges, Christian medical men who would be delighted to undertake this work.



Several are known to the writer of this paper. The necessity for much lecturing has been considerably obviated of late, by the many excellent text-books which have been published on almost every branch of medical study. In the present day, the student's precious time is too much taken up in listening to mere lectures, the substance of which he could find in books, instead of being spent in the hospital, and in those class-rooms where alone he can learn the practical and fundamental parts of his professional training. There can be no doubt in the mind of any one well acquainted with the subject, that a system of teaching to a large extent tutorial, and to a small extent professorial, in its character, is most advantageous to the learner, and likely, other things being equal, to accelerate his progress in learning. It is such a system that we propose for the lady medical missionary agents at the outset. As no diploma is needed to enable a Christian lady to practise medicine and to cure disease in the Zenanas of India, no diploma need be sought. If properly taught, in the private manner we have suggested, the lady medical missionary will be infinitely superior to all native hakims and nurses, and will be surpassed in India by few professional medical men, in all that relates to the diseases peculiar to women and children.

‘Now, it is just to this branch of medical study that the lady medical missionary ought to devote her chief efforts. Her course of study should in-

clude obstetrics, diseases peculiar to women and children, diseases of the skin, and diseases of the eye. The lady missionary should be well versed in all those subjects, if the sphere of her labours is to be the Zenanas of India. Let no lady, however, be discouraged by the number of the subjects; for, if she were but well conversant with the first and second, she would be able to accomplish such an amount of good in Indian homes, as is incredible to a Western mind. The writer need not further enlarge on the professional training of the lady medical missionary, as the Christian medical men who will undertake this work, at the request of the Society, will know what is practically valuable and *essential*. While reading much, the lady medical missionary should also see much, and, as soon as possible, *do much*. Before leaving this important branch of our subject, the writer would take leave, strongly to urge upon the friends of this movement, to exert themselves to the utmost to establish a medical college *exclusively* for women, where it would be possible for the medical missionary of this Society to obtain, easily and unobjectionably, her professional training in all its branches.

‘We shall now briefly state, and answer, several objections which have been urged against female medical missions in general, and, in particular, against the Indian Female Normal School and Instruction Society’s incorporating them as a branch

of its operations, for the amelioration and evangelization of the women of India.

‘The *first* objection we shall notice is, “The difficulty for any lady to get, or to be willing to receive from gentlemen, the essential professional instruction and training.” This is really no valid objection, for there are many difficult things which are not impracticable, and this is one such. We know that most refined ladies have, for many years, acted as nurses in our hospitals, both at home and abroad. Refined ladies have nursed, and do nurse, men formerly strangers to them, and men often very rough and uncouth. Genuine, actual nursing is often a thing far more trying to delicacy of feeling, than medical studies under male teachers ever can be. And yet, accomplished and refined ladies are to be found, in many of our metropolitan and provincial hospitals, right nobly and bravely nursing the sick. True Christian refinement will enable a lady to do anything, that is not sinful, to help and cheer the suffering needy, and thereby promote Christ’s glorious cause in the world. We are bold to say, that no pure-minded, earnest Christian lady would ever feel the least uncomfortable while receiving surgical and medical instruction from a refined Christian medical man. Earnestness and purity of heart, and the noble aim of being a co-worker with Christ, stamp clean out all fleshly feelings of shame. It is only to a cold outsider, who, forgetting the noble object in view in the study of

medicine by a Christian lady animated with missionary impulses, that this objection could occur, or be in any degree cogent.

*‘Second Objection.*—It has been said, “Will not many, who love missionary evangelistic work, take fright at the Indian Female Normal School and Instruction Society if it take up female medical mission work, thinking that it, as a Society, is going out of its way by so doing?” The answer to this interrogative objection is an emphatic *No*; for it has been shown, in the previous part of this paper, that millions of the women of the middle and upper classes of India are unapproachable through the agency of education; that, from the snowy Himalaya to the distant Cape Comorin, there is a crying necessity for correct and skilful medical aid; and that, this being the case, it would be unwise of the Society to neglect making use of this agency for the realization of their grand object of making known to the women of India the gospel of Christ. No old friends of the Society will desert her on this account, but will probably contribute more liberally to her funds, and new friends will be attracted. It surely cannot be beyond the sphere of a Society, whose main object is the amelioration and evangelization of the suffering and secluded women of India, to make use of an agency which lessens pain, saves life, opens the door of the Zenana, and brings the light of the gospel to its dark inmates.

*‘Third Objection.*—“The expensiveness of the

professional training" has been urged as a cogent reason for the Indian Female Normal School and Instruction Society's refusing to take up this branch of missionary agency. But the silencing fact, that a handsome sum of money has already been contributed by many warm friends of the undertaking, is a sufficient answer to this objection. And there can be no doubt, that the funds of the Society, instead of being lessened by this forward step on the part of the Committee, will certainly be increased by it. It is a gratifying fact, that the Society's income has been augmented by one half of what it was last year ; and this increase is most noticeable during the last quarter of the financial year, when it was well known that the Committee of Management contemplated taking up medical missions as an integral part of the Society's work.

*Fourth Objection.*—"Supposing the difficulties of training to be overcome, and a medical missionary lady sent to India, to any specially Mohammedan station, would not her time be so constantly and entirely occupied with medical work, that she would have little or no time for the evangelistic?" The lady medical missionary would certainly find her hands very full for a time, until she had trained helpful assistants. But, in course of time, her hands would be set free from much of the purely manual work, and she would have leisure at her command for purely evangelistic effort. It is not to be imagined, however, that a lady medical missionary

of the right sort, would wait until she had much time at her disposal, before making direct efforts to christianize her patients. She could not even feel a pulse without doing it like a Christian. If there be any truth in the present objection, it may be urged, with far more force, against making secular education, including reading, writing, geography, and needlework, a vehicle of Christian teaching. On the one hand, no one will deny, that secular education, in Christian hands, may be made to convey much Christian doctrine; and, on the other, no one will deny, that pain and sickness are the best softeners of the human heart, and that a natural man or woman is thankful for nothing so much as life and health. The lady medical missionary, with the blessing of God resting on her work, will certainly be able to save the former and to restore the latter, and thus, she will bind her patients to her with chains of love and gratitude for life.

‘While all this is true, the writer of this paper has long held that, if the full fruits of medical missions, male or female, are to be reaped, the divine example of our blessed Saviour ought to be followed, and the workers sent out two and two together.

‘*Fifth Objection.*—“The Indian Normal School and Instruction Society has more openings to Hindu Zenanas than its agents can take advantage of, and its funds do not as yet suffice to send all the



*evangelistic agents* required :—Is it wise, therefore, to take up, in present circumstances, the new and expensive agency of female medical missions ?” Two points in this objection call for remark. It is said there are more openings to the Zenanas of Hindus than can be entered. No one will say this of the homes of the Mussulmans of India, for whom this Christian agency of female medical missions is so admirably adapted. Now, where secular education finds a ready and sufficient entrance into Zenanas, it would be superfluous to employ female medical missions for evangelistic purposes; and therefore it is advised, that lady medical missionaries be sent to Mohammedan centres first, where an English education will not tempt the bigoted and sulky Mussulman to open his door to the Christian instructress. The writer knows of a lady medical missionary who has not as yet been very successful in a Hindu centre, which, however, is peculiarly conditioned; while he knows of another lady who has been successful in a Mohammedan centre beyond her most sanguine expectations. Another point in this objection which needs comment, is the use of the word “*evangelistic*” as applicable to the educational missionary, implying that the lady medical missionary would not belong to this class. Now, it is evident to any unprejudiced mind, that the lady who wields medicine to advance Christ’s kingdom, is as much entitled to the appellation of “*evangelistic*” agent as the lady who wields



the crochet-needle and the school-book for the same great end.

‘Thus, the question, as to whether it is wise, on the part of the Indian Female Normal School and Instruction Society, in present circumstances, to undertake female medical missions as an evangelistic agency, has virtually been decided in the affirmative; and this procedure, instead of diminishing the Society’s ordinary income, will, in all probability, be the means of greatly augmenting it. “There is that scattereth, and yet increaseth.”

‘India is not now an entire stranger to female medical missions. In the provinces of Northern India, female medical missionaries are already at work, lessening pain, saving life, and training native Christian women for the same end. One lady medical missionary writes: “We are always treated with much respect in the Zenanas, and are called upon by all classes of natives. Many of our patients are among the better class of native ladies.” Another lady medical missionary has more work in the best families where she is located than she can overtake, and that, too, although she has let it be well known that she is a Christian missionary, anxious to do all the good she can to the souls as well as to the bodies of her patients.

‘In conclusion, if Florence Nightingale, a thorough English lady, — being all that that term implies, — left home and friends, and went to Scutari out of philanthropy, to nurse and doctor England’s

wounded and dying soldiers, surely other ladies, who have it in their power, should see no insuperable objections or difficulties in giving up home and going to India, to nurse and doctor their needy and suffering sisters *for Christ's sake*.

‘At any rate, India needs female medical missionaries. India will welcome them, India will bless them for their work; and many homes, now dark, will be lighted up, through their labours, with the knowledge of Him who is the Light of the world.

‘Surely it is a thing incredible, that, among the many Christian daughters of England, there are none brave and noble-minded enough to undertake this work, which, of all works, most resembles that of the great Master Himself, who, “though He was *rich*, yet for our sakes became *poor*, that we through His poverty might become rich;” and of whom it is written, “Jesus went about all Galilee, teaching in their synagogues, and preaching the gospel of the kingdom, and healing all manner of sickness and all manner of disease among the people. I have given you an example, that ye should do as I have done to you.”

‘W. J. ELMSLIE.’

While the foregoing pages, urging the importance of Zenana Medical Missions, have been passing through the press, we have received information that a plan has been proposed for training European ladies in India for this work, and that there

is every prospect of its being successfully carried out.

The following extract from a letter of Dr. John Husband, a former student of the Edinburgh Medical Missionary Society, now a medical missionary, in connection with the United Presbyterian Church, at Ajmere, Rajpootana, forms a fitting close to this chapter. The letter is dated Ajmere, June 14th, 1873 :—

‘Doubtless you have, long ere this, seen Dr. Colin Valentine’s paper, read at the Allahabad Conference, and know about his proposed scheme for training young native Christians as medical missionaries. It is proposed to unite with this, another scheme, not second to it in importance, viz. an institution for the training of ladies (not natives) resident in India, to act as female medical missionaries in the Zenanas of the country. A committee has already been formed in London to forward this scheme, and what is now proposed is, to unite the two schemes under one Superintendent, whose principal work will consist in teaching the ladies, while the young men are all to be educated at the Agra Medical College, free of charge. The scheme, I think, is perfectly feasible, and can be easily managed by one man. I mention it to you, that you may give it publicity, and, perhaps, be able to help it on.

‘I may say, that I have been asked to take the oversight of the Institution, should the Mission Board of the United Presbyterian Church agree to

my transfer to Agra. What they may decide, we do not know; but, so far as I am concerned, I have left the matter entirely in their hands, and will be pleased either to go or stay as they may decide. Whether I may be permitted to do anything to help on this undertaking, or otherwise, I trust it will go forward; for, not till we get a staff of well-educated *European* ladies, can we hope to overtake the large masses who are shut up, without medical help and without spiritual instruction, in the Zenanas of the country.'



### XIII.

#### Visit Home, 1870-71.

‘ We live in deeds, not years,—in thoughts, not breaths,—  
In feelings, not in figures on a dial.  
We should count time by heart-throbs. He most lives  
Who thinks most, feels the noblest, acts the best.  
Life’s but a means unto an end ; that end,—  
Beginning, mean, and end to all things,—God.’





## CHAPTER XIII.

### VISIT HOME, 1870-71.

EARLY in 1870, Dr. Elmslie returned to this country, and it was then that the writer had the pleasure of making his acquaintance. Engaged, as both of us had been, in the same work in India, though in spheres far separated from each other, and carrying on our work under circumstances as widely different, it was no ordinary pleasure to meet at home, and to recount our varied experiences, and help each other to form plans for future work. With pleasure mingled with sadness, we recall to our remembrance those happy interviews, sometimes, in the Medical Mission House, 56 George Square, at other times, pacing, arm-in-arm, in front of the Royal Infirmary, waiting till twelve o'clock, when we would adjourn to the Clinical Lecture-room, or accompany one or other of the Professors round the wards;—and then, Dr. Elmslie, note-book in hand, was still the student, taking notes of all the points of interest in the cases commented on at the

clinique, and recording, for future reference, anything special in the history or in the treatment of cases in the wards he visited.

No one could enjoy such opportunities of intercourse with Dr. Elmslie, without being impressed with the conviction,—which, no doubt, the perusal of the foregoing pages has produced on the mind of the reader,—that he was a model medical missionary. Dr. Elmslie had a thorough grasp of the medical mission principle, and he was endowed with gifts and graces, which eminently qualified him for proving the value of that principle. His professional attainments were of a high order, his judgment calm and clear. His features revealed the energy and determination of his character. His bright, open countenance was the expression of his frank, cheerful disposition. We never remember seeing him at all despondent. Even amid all the difficulties and discouragements of his missionary career, we cannot imagine him otherwise than bright and cheerful, because he was ever, as a little child, trustful.

‘The heart that trusts for ever sings,  
And feels as light as it had wings;  
A well of peace within it springs,  
Come good or ill :  
Whate’er to-day, to-morrow brings,  
It is His will.’

His kindly, genial nature; his quiet, tender sympathy; his frank, manly bearing; and, above all, the

reality and depth of his religious life,—were traits of Dr. Elmslie's character, which those who knew him can never forget.

In speaking of his work, he always manifested a jealous fear, lest, in our estimation, results should be magnified beyond what the facts would justify; and the charm of his narrative was never broken by an undue prominence of self.

During his sojourn at home, Dr. Elmslie was not idle. As already indicated, he frequently availed himself of the privilege of attending clinical lectures in the Royal Infirmary, and likewise the meetings of the Medico-Chirurgical Society; and, in every available way, he sought to improve his opportunities, in order that, on his return to India, he might be able to carry with him the latest improvements in medical and surgical practice, and bring to bear upon his work a more extensive experience.

Much of his time was occupied in preparing MS. for the press, and in correcting the proofs of a Kashmir Vocabulary. This important work he completed before he left England; but, alas! the summons came before a finished copy had reached him. Only two days after his death, his sorrowing widow had the mournful pleasure of receiving the result of his patient, persevering study, in the form of a neatly bound volume, published by the Church Missionary Society, which will, no doubt, prove of great service to future missionaries, and to English residents in Kashmir.

The following extract forms part of a deeply interesting memorial sketch, which appeared in the April number of the *Indian Female Evangelist*, entitled 'Recollections of Dr. Elmslie,' and refers to his engagements during part of his furlough at home:—

. . . . 'Early in March 1871, he set himself to work in earnest at his Kashmir Dictionary. On the 14th he writes: "The only thing that reconciles me to remain home another year, is the fact that I am doing something just now, which may be truly looked upon as one kind of mission work, and which I can do here as well as in India. Whatever my future movements may be, I hope that this year's work at home will, in some small measure, facilitate mission operations in Kashmir in the future. During the last fortnight I have worked very hard, and, I am happy to say, have made considerable progress. I am just beginning to feel again the old studying frenzy coming on, and delight in the feeling." There is no doubt he injured his health by his severe application. On the 29th June he writes: "I have had rather a sharp attack of illness, brought on, the doctor says, by my habits having been, of late, too sedentary. Indeed, ever since I returned to Scotland, I have kept very close to my books."

'In April we had asked him to come and address a working party. He could not comply with the request, but adds: 'However, perhaps you and the Indian Female Evangelist Society are not the

losers by this ; for, indeed, I have not much that is fresh and interesting to say. One thing I can say, and that is, to bear my most unhesitating and unqualified testimony to the devotion, zeal, and unwearied activity of the agents of this Society, in the midst of a lonely life, a trying climate, and a sphere of work, the sights and smells of which, are often of the most repulsive and disgusting character, not to speak of other and more subtle trials that they, in common with all workers in India, have to endure. These self - denying, noble - minded, persevering women richly deserve the full-hearted sympathy of their Christian sisters in England. Nothing, I believe, but love to our dear Redeemer, could enable those heroic women to labour in India, as they do, so uncomplainingly, so patiently, and so perseveringly. The Lord richly bless them in their great and noble work ! I consider the cause of this Society, one of paramount importance in the evangelization of India."

'Some Christian friends desired to have Dr. Elmslie settled at home, in medical mission work. He spent much of his time in waiting upon God for light to guide him. His heart was in Kashmir, but there were special points connected with the work there, which tried him much. The being able to remain in the valley for six months, he felt, was a terrible hindrance to success. As things then existed, he knew, that to carry on medical mission work there, was fraught with great bodily toil and mental

anxiety, and that it would be impossible to continue in it many years. He also evidently dreaded the long fatiguing journeys, over lofty and rugged mountains, in the winter season, when the missionary had to quit the valley ; but, having been there already, and God having, to some extent, blessed his work, knowing the need of the people, and their language, and having gained their confidence and esteem, he felt the path of duty was marked out for his return.

‘General and Mrs. Lake visited Edinburgh in August, and this gave him great pleasure ; also a visit from “a former dear college friend” cheered him, and did him good. In September he spent some time with his friends, Mr. and Mrs. Ritchie of Coull. Mr. Ritchie gave him considerable help in arranging the English words of his Dictionary ; and he adds : “He is a very dear and old friend, and preaches the Master’s gospel fully and faithfully. I was to have left my friend’s warm roof to-day, but he will not hear of it, as he purposes to dispense the Lord’s Supper next Sabbath, and he wishes me to be present, which wish I am delighted to gratify. . . . I think the Lord has need of me, at least for a little longer, in down-trodden Kashmir. I am ashamed to think I have been hesitating about returning to the honourable post which, I trust, God assigned me there in 1864. The post is a very trying one, but God verified, in my experience, the declaration, ‘My grace is sufficient for thee,’ and I trust He will do it again.”

‘ He came south in October, and again took up his abode near his old friends, Mr. and Mrs. Handcock. He spent some busy evenings with us, whilst correcting the proof-sheets of his Dictionary for the press. We also had some pleasant Bible readings ; his words were not many, but pithy, to the point, and always full of Christ. His prayers were ever marked by their genuine character and childlike simplicity.

‘ After Christmas he returned to Scotland, having become engaged to Miss Duncan, of Eyre Place, Edinburgh. He wrote to make known to us his great happiness. Miss Duncan had early given her heart to the Lord, and her energies to His service, and already, she had a great desire to consecrate her life to mission work among the heathen. She was thus eminently fitted to share his labours. The marriage took place in the end of February. On the 6th of March, we all met at the house of a relation in London. Dr. H. Bonar was with us, and, after some happy intercourse with the dear missionaries, he read Romans xvi., and commended them, with much power and affection, to the Lord in prayer. The next day they sailed from England, on board the *Massilia*.’

During the summer of 1871, the Directors of the Edinburgh Medical Missionary Society, having heard that Dr. Elmslie was somewhat undecided about returning to Kashmir and anxious to secure, if



possible, the services of such an able and experienced missionary, to succeed their lamented agent, Dr. Paterson, at Madras, unanimously resolved to offer that appointment to Dr. Elmslie. Shortly after receiving this invitation, he asked the Board to allow him a few days, that he might give the proposal his prayerful consideration. From the tenor of his first reply, and judging from an interview which two of the Directors had with him in the interval, the impression was, that he would go to Madras; but, within a week, he wrote to the Secretary declining the appointment, stating as his reason for so doing, that if, in the providence of God, he returned to India, he felt that Kashmir had the first claim upon him, and there he would like to labour.

Having decided to return to his much-loved work in Kashmir, Dr. Elmslie began to make preparations for his departure. On the 16th October 1871, he wrote the following letter to his old friend Dr. Cleghorn, with whom, a short time previously, he had spent a few days, and on that occasion gave an account, in the parish church, of his work in Kashmir, which produced a deep impression upon the minds of his hearers; all the more so, that so soon after they had listened to his heart-stirring words, his labours on earth were closed.

‘MY DEAR FRIEND,—My chief object in writing to you now, is to inquire of you, what a copy of Wight’s *Leones Plantarum Asiæ Orientalis*, in good condition,

ERRATA in the accompanying Volume, which please  
correct with the pen.

Page 216, last line, *for* Leones *read* Icones, and *for* Asiæ  
*read* Indiæ.

Page 217, second line, *for* Boyle's *read* Royle's

Page 219, ninth line, *for* 1871 *read* 1872.



is worth; also, what should I give for a copy of Boyle's *Botany of the Himalayas*? Can you tell me where I am likely to meet with works of that kind?

'Should I return to India, which I am now very likely to do about the end of January next, I should like to do a little to the botany of those interesting and far-away regions. I should feel extremely obliged to you for any hints, as to how to proceed in the study of the botany of Kashmir and the surrounding mountains; also, as to how to do with any specimens which I may collect, and also as to any points, of pre-eminent importance, in *Flora* of the valley and the neighbourhood. I feel sure, that I could not apply to one better qualified than yourself, to give me directions as to how to proceed in the study of the *Himalayan Flora*. I may state, that I have done little or nothing to botany since I left college, and, therefore, any advice as to what books to take with me to India, or on any other botanical matter, will be most gratefully received by me. . . . My little Vocabulary of Kashmir is almost finished, and I am to leave this for London on Friday night, God willing, to superintend the printing of it. I hope it may be useful.—With kindest regards to Mrs. Cleghorn and yourself.  
—Yours affectionately, 'W. J. ELMSLIE.'

This letter gives us some indication of what might have been expected from Dr. Elmslie, in the way of original scientific research, had his life been

spared. He was an ardent student of nature, and in the study of other departments of natural science besides that of botany, sought, and found, that rest and relaxation of mind and body, which, in the midst of such anxious and harassing work, he, at times, so much needed.

During the first year of Dr. Elmslie's absence from Kashmir, his place was ably supplied by the Rev. W. T. Storrs, himself a medical man; and during 1871, by the Rev. T. V. French, the Rev. Robert Clark, and Mr. John Williams, a native medical evangelist, who possesses considerable professional skill, and whose walk as a Christian and zeal as an evangelist are such, as adorn the doctrines he teaches.

These brethren laboured very earnestly and faithfully, and with some measure of success. Regular receptions for the sick were held, and large numbers were successfully treated. Often they had to deal with turbulent audiences, but sometimes they had hearers 'whose hearts God seemed to be teaching and arresting, if not bowing down before the message of warning, and of peace and life in Christ.' Several natives, evidently in an anxious, inquiring state of mind, expressed a wish to come and converse with the missionaries in their tents; but orders, it was said, had been issued to prevent them doing so.

It was thus very providential that there were those at hand, able and willing to carry on the work

in Kashmir while Dr. Elmslie was at home. Had it been otherwise, much of the good results of his five years' labour might have been lost ; and, on his return, he might have found it much more difficult than it was, to regain, for himself and his mission, that position of influence, and that degree of toleration, which had been attained previous to his departure.

Dr. Elmslie was married in February 1871, and early in March, he and Mrs. Elmslie bade farewell to kindred and friends, and sailed for India, with bright prospects before them of a long, happy, and prosperous missionary career.





## CHAPTER XIV.

### Return to India, and Close of Labours.

‘ Go, labour on, spend and be spent,  
Thy joy to do the Father’s will :  
It is the way the Master went,  
Should not the servant tread it still ?

Toil on, and in thy toil rejoice,  
For toil comes rest, for exile home.  
Soon shalt thou hear the Bridegroom’s voice,  
The midnight peal, “ Behold, I come !” ‘



## CHAPTER XIV.

### RETURN TO INDIA, AND CLOSE OF LABOURS.

HAVING reached India, after a pleasant and prosperous voyage, Dr. Elmslie lost no time in preparing for the long, trying journey to Kashmir. The route selected was that along which he travelled on his first visit to the valley in 1865, namely, *via* Rawul Pindee and Muree. At the latter place, the Rev. T. R. Wade joined them; and meeting again, under such pleasant circumstances, with his old friend, who was now to be associated with him in mission work in Kashmir, was a source of great comfort and joy to both Dr. and Mrs. Elmslie.

As on former occasions, along the line of march, they held receptions for the sick, and assembled as many of the people as they could to hear the message of redeeming love. Mr. Wade generally conducted the service, after which Dr. Elmslie examined the patients, and prescribed for them. At some of the halting-places, upwards of a hundred were present; at other places, not so many.

The news having got abroad that the Doctor was

on his way to Kashmir, some of his patients came long distances, to secure, either for themselves or their friends, the benefit of his advice and treatment. One old man, seventy years of age, travelled upwards of a hundred miles with his sick son, in order, if possible, to get him cured of his disease; and, on his first interview with the Doctor, he fell at his feet weeping, and implored him to do something for the relief of his poor son.

Such incidents remind us of the ministry of Him who 'went about continually doing good,' and concerning whom it is written, 'And a great multitude of people, out of all Judea and Jerusalem, and from the sea-coast of Tyre and Sidon, came to hear Him, and to be healed of their diseases.'

Rejoicing in such opportunities of working for the Master by the way, delighted with the beautiful scenery along the route, and invigorated by the pure bracing mountain air, they pursued their journey, till, in the good providence of God, they reached their destination in safety. We can imagine his gratitude and joy, at finding himself, once more, at Srinagar, accompanied, as he now was, by one who was able, so fully, to help him in his work, to rejoice with him in his joy, and to share with him his trials. The Doctor got his dispensary in order, and commenced operations at once; Mrs. Elmslie studying the language, and Mr. Wade assisting the Doctor in the dispensary, and in the school which they had opened. The numbers of patients presenting them-

selves for treatment were greater than ever before. From 150 to 190 patients were examined and prescribed for daily. In little more than four months he had treated upwards of 3000 patients, and performed more than 200 surgical operations, besides ministering to nearly 400 cholera patients. While the faithful labourers were thus bearing the burden and heat of the day in Kashmir, many in Scotland and elsewhere were praying for them and for their work; and God, in His own way, was answering those prayers. In the midst of many trials of their faith and patience, the missionaries had much to encourage and gladden their hearts. The people, generally, heard the Gospel gladly, and not a few seemed convinced of the truth of Christianity, and were almost persuaded to profess their faith in Christ; but they were afraid that, so soon as the missionaries left, they would suffer such persecution as would render it impossible for them to remain in their own country. This fear—alas, too well grounded—made Dr. Elmslie all the more anxious to obtain permission to remain permanently in Kashmir; and he, again, put forth every effort to procure the longed for sanction of the Supreme Government to his remaining in the valley all the year round.

As time wore on, work and anxiety increased. Cholera was sweeping away hundreds of the inhabitants, and no entreaties could persuade the Doctor to relax his efforts, which were visibly exhausting his strength. Mr. Wade was stricken down with

fever, and so soon as he was able to travel, was obliged to leave Srinigar. Dissatisfaction, which resulted in serious riots, increased the suffering and distress amongst the people. A heavy flood occurred, caused by the melting of snow on the mountains, similar to that which happened in 1869, compelling them to vacate their house and seek refuge elsewhere. Animosity and persecution, though not now perhaps so openly manifested, were still as bitter and cruel as ever, and the Doctor himself was far from strong; but still he worked on, instructing the ignorant, comforting the distressed, healing the sick, and preaching the Gospel.

The time drew near for Europeans quitting the valley. Up till the last, however, Dr. Elmslie hoped against hope that he might receive a favourable answer to his request for permission to remain, and that even that year they might not have to leave their work and return to the Punjab; but God had ordered it otherwise. Having just recovered from a slight attack of fever, exhausted with so much hard, constant, anxious work, and with his heart saddened by the many trying scenes he had witnessed, and by the ingratitude of those in authority amongst the very people he sought to benefit, Dr. and Mrs. Elmslie, accompanied by their assistants and servants, left Kashmir on the 21st of October.—And now commences a march through the wild rugged passes and over the snowy ranges of the Himalayas, which no pen but that of the bereaved companion of his journey, and the partner

of his joys and sorrows, can describe, and which no one can think of but with glowing admiration and tender sympathy. We magnify the grace of God as it was manifested in the calm composure of the dying missionary, and in the submission and heroic devotion of his beloved wife.

The following brief but touching narrative of the mournful journey and close of Dr. Elmslie's life is taken from the memorial sketch in the April number of the *Indian Female Evangelist* :—

‘From some extracts from Mrs. Elmslie's journal, describing that last journey of her dear husband, it seems that, though he was weakened by a feverish attack, he started well, and they had two days' sail up the river. Then began the mountain ascent (over a pass 11,700 feet above the sea). After they had climbed for a day, he could not walk at all, and had to give in, very reluctantly, to take his wife's dandy. At first he did not seem to suffer much, except from weariness; but about the 27th, his great breathlessness, the *very* irregular beating of the pulse, and other painful signs, gave the loving wife her first warning. That night she knelt by him for hours,—Benjamin (the Christian Native Assistant) helping her to apply mustard poultices and various remedies. In the morning he seemed scarcely conscious of all he had passed through. They travelled on, the bearers trotting, and Mrs. Elmslie trying to keep up, and walking sixteen, and even twenty miles a day. The path seemed sometimes like a ledge in the sheer precipice; and as she watched the



bearers with their precious burden, she trembled, and could only cry to the Lord to save him. Once a man did slip, but at the spot the path was a little wider. The nights were bitterly cold, and the poor tent was but little protection, and then his sufferings were great. In one part the bears had left their track on the snow, and the dear Doctor insisted on the bearers going slowly, to keep his wife in sight. At Rajauri they rested some days. One night there he was very ill, and she speaks of this as "my second night of preparation." Next day he hardly spoke, and never offered to rise, but just lay still, with a *far-off* look in his eyes, which shone with a strange and lovely lustre. The doctor at Gujerat went out a day's march to meet him. On Saturday, November 16th, they reached Gujerat, and were received with the utmost kindness by Mr. and Mrs. Perkins; and on the Monday, the Lord took His dear servant home.'

His dear friend and fellow-labourer, the Rev. Robert Clark of Umritsur, hearing of his alarming illness, hastened to Gujerat, but arrived only in time 'to witness the settled smile of peace and victory on his features as he lay in his coffin.' Mr. Clark writes from Gujerat on November 20th:—

'We carried the remains of our dear friend and fellow-labourer, Dr. Elmslie, to their last resting-place this morning, in the midst of many tears of the native Christian helpers of the Kashmir Mission. He was taken ill on leaving Kashmir; and after a

most trying journey over the Pir Panjal pass, he arrived here, in English territory, on Saturday, and died on Monday evening. I received, at Umritsur, a telegram on Monday afternoon, and came over at once, but was only in time to witness the settled smile of peace and victory on his features as he lay in his coffin. We have laid our friend and brother to rest on the battle-field of Gujerat, where the Punjab first came entirely under English rule, and he will there sleep quietly on, till he hears the Saviour's voice calling him from the bed of slumber, with the words, "Well done, good and faithful servant." Well did he fight the better fight, and loved not his life unto the death; and surely his death was glorious, far more than even that of those who died here on the field of victory in 1849.'

'Faithful to death, O man of God, well done!  
Thy fight is ended, and thy crown is won.'

His life was a noble life; his work, the most honourable work on earth; and his reward is the starry crown!

'AND I HEARD A VOICE FROM HEAVEN SAYING UNTO ME, WRITE, BLESSED ARE THE DEAD WHICH DIE IN THE LORD FROM HENCEFORTH; YEA, SAITH THE SPIRIT, THAT THEY MAY REST FROM THEIR LABOURS, AND THEIR WORKS DO FOLLOW THEM.'

All that tender sympathy and kindness could do to comfort the bereaved widow was lovingly done by Christian friends around her, and many fervent prayers ascended from praying hearts at home on her behalf; and our covenant-keeping God has

caused her to experience the fulfilment of His gracious promise: 'When thou passest through the waters, I will be with thee; and through the rivers, they shall not overflow thee: when thou walkest through the fire, thou shalt not be burned; neither shall the flame kindle upon thee.'

Mrs. Elmslie returned with Mr. Clark to Lahore, and from thence went to Umritsur, where now, in the spirit of true missionary devotion, she occupies a field of great usefulness among the children in the Orphanage and schools, and the Lord is giving her much encouragement in her work. At Lahore, Mrs. Elmslie received an official communication, *dated the day after her beloved husband's death*, conveying the intelligence, so long prayed for and laboured for by Dr. Elmslie, that *permission would henceforth be granted to all who are not Government servants to remain in Kashmir all the year, so long as they conduct themselves with propriety, and submit to the laws of the country.* 'CALL UPON ME IN THE DAY OF TROUBLE; I WILL DELIVER THEE, AND THOU SHALT GLORIFY ME.'—'VERILY GOD HATH HEARD ME, HE HATH ATTENDED TO THE VOICE OF MY PRAYER.'—'BE STILL, AND KNOW THAT I AM GOD; I WILL BE EXALTED AMONG THE HEATHEN, I WILL BE EXALTED IN THE EARTH.'

## LIVINGSTONE MEDICAL MISSIONARY MEMORIAL.

THE object of the Edinburgh Medical Missionary Society is to promote, in every possible way, the consecration of the healing art to the service of Christ, especially in connection with Missions to the heathen. It seeks to accomplish this object:—

I. By keeping in view the fact, that He who commanded His disciples to preach the Gospel directed them also 'to heal the sick.'

II. By educating at the University or Medical School, approved Christian young men desirous of devoting themselves to Medical Missionary work, who may need such help, and by providing means for training them for that work.

III. By supporting as many Medical Missionaries at various Mission stations, as the funds at its disposal will admit, and by supplying the several Evangelical Missionary Societies with properly qualified Medical Missionaries.

The Society's Training Institution at 39 Cowgate is distinct from the 'Miller Memorial Home,' 56 George Square, where the Students reside, and which was purchased for the Society by funds raised by subscription, as a Memorial to the late Professor of Surgery in the Edinburgh University, whose name it bears.

The Training Institution and Dispensary combines several objects, each of them of great importance.

I. It is an extensive Local Charity, ministering, on an average, to about 8000 poor patients annually.

II. It is a valuable Evangelistic Agency, reaching a class otherwise inaccessible.

III. It is an Agency which encourages Christian work amongst Medical Students generally.

IV. It is a Training Institution for Medical Missionary Students for the whole world. The Society, which is the only one of its kind, has at present thirteen Students, Presbyterian, Episcopalian, Congregational, and Baptist, in course of preparation for Medical Missionary service.

The number of applicants for the training afforded by the Society is increasing year by year; still the demand for Medical Missionaries is greater than the supply.

The premises in which the Society carries on its work are quite inadequate. They are damp and old, and having been recently surrounded with lofty buildings, light is excluded and the ventilation is very imperfect, besides which, the property does not belong to the Society.

Moreover, the Directors, for some time past, have had in view the urgent demand there is for a well-trained Nursing Agency, as an auxiliary to Evangelistic effort, both at Home and Abroad; and the only obstacle in the way of providing means for the efficient training of such an Agency is the very limited accommodation at their Institution, 39 Cowgate.

The aid which the pioneers of the Gospel and of civilisation derive from a knowledge of Medicine has been emphatically stated in the writings and illustrated by the life-work of Dr. Livingstone, whose loss the nation mourns; and the Directors of the Edinburgh Medical Missionary Society feel that no more appropriate memorial to the late lamented missionary traveller (himself a corresponding member of the Society for eighteen years) could be devised, than a substantial and commodious building, suitable for carrying on the Society's operations, and worthy of the cause he so nobly maintained.

The Directors, having received the hearty consent of the family of the late Dr. Livingstone, and the warm sympathy of his friend Sir Bartle Frere, have determined, in order to meet the urgent claims of the cause, and, at the same time, honour the name and memory of one of its brightest ornaments, to erect a Livingstone Memorial Medical Mission Training Institution, which will serve to embody in a practical and enduring form the grand object of his life.

To enable them to do so, the sum of £10,000 will be required; and they now appeal to the friends of Missions, and to the admirers of the great missionary explorer everywhere, to aid them in this undertaking.

Contributions will be received by Dr. A. G. Miller, 15 Shandwick Place, who has been appointed by the Society Treasurer for this object, and by the Rev. John Lowe, F.R.C.S., Superintendent, Mission House, 56 George Square, Edinburgh, and will be acknowledged in the Society's *Quarterly Paper*, a copy of which will be forwarded to each subscriber, also in the newspapers in which this appeal appears.

The following extracts from letters received from W. Oswell Livingstone, Esq. (Dr. Livingstone's son), and from the Right Honourable Sir Bartle Frere, show their warm sympathy with the proposal of the Directors.

Mr. Livingstone writes:—

'I have consulted my brother and sisters about the matter contained in your letter of the 9th inst., and we all consider your letter as a mark of esteem towards our beloved father, and as an evidence of your kindly sympathy with us in our affliction.

'We are sure that no monument could be raised which would be more in keeping with the aim which our father had during his arduous life, and which would be so valuable to mankind, and so lasting, as the one which your proposal embodies.

'Allow me to express our thanks to the gentlemen who have been so kind as to consult us regarding a Mission in which we all take so much interest, and also a hope that your wishes may be speedily accomplished.'

Sir Bartle Frere writes:—

'I have always felt that the Edinburgh Medical Missionary Society was doing a great work, and am very glad to hear that you propose to enlarge its sphere of usefulness. . . . I think there could not be a more fitting memorial to your great fellow-countryman; and with such an example before them, I think the Students of the Medical Missionary Society must prosper wherever they are sent; and I think the thorough training of good nurses, to co-operate with the Missionaries abroad, is all that is needed to perfect the work of the Society.'

The Viscountess Strangford writes:—

'While assuring you of my hearty good wishes for the success of Memorial Medical Mission,—the Memorial of that great and good man whose life will be a bright example for many a long year to come,—I am glad to take the opportunity of earnestly entreating you to make a powerful effort now in pushing forward the agency of Trained Nurses, to be provided at your Missions. Not the Missions of these countries, but the Missions planted in all those wide lands where no medical *man* ever reaches the sick *woman*; where the women sicken, suffer, and die, untended and unrelieved; where no assistance to body or soul can be afforded, save by one of their own sex; and where a woman, trained to even but little experience of nursing, may daily prevent years of suffering and disease; besides seizing the frequent opportunities thus, and thus alone, given of setting these poor creatures' feet on the path that leadeth to eternal life.'



Col. Thompson  
7/7/92



5

